2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2004
Secretary of State

DOCUMENT# N03000010121

Entity Name: LAFLEUR'S GYMNASTICS, TAMPA PARENTS ORGANIZATION, INC.

Current Principal Place of Business:

10205 ANDERSON RD
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

10205 ANDERSON RD
TAMPA, FL 33634

New Mailing Address:

FEI Number: 11-3708742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCNAMARA, KEVN
14509 THORNFIELD CT
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCNAMARA, KEVN
Address: 14509 THORNFIELD CT
City-St-Zip: TAMPA, FL 33624

Title: VD ( ) Delete
Name: HIRES, CIA
Address: 4518 S FERNCROFT CIRCLE
City-St-Zip: TAMPA, FL 33629

Title: VD (X) Delete
Name: ADCOCK, JUDY
Address: 8420 BOXWOOD DR
City-St-Zip: TAMPA, FL 33615

Title: STD ( ) Delete
Name: PACE, SUSAN
Address: 606 SHELLCRACKER CT
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVN M. MCNAMARA PD 08/25/2004

Electronic Signature of Signing Officer or Director — Date