

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010478

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** TEMPLE TERRACE GYMNASTICS PARENT ASSOCIATION, INC.

**Current Principal Place of Business:**

6610 E. WHITEWAY DR.  
TEMPLE TERRACE, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

6610 E. WHITEWAY DR.  
TEMPLE TERRACE, FL 33617

**New Mailing Address:**

**FEI Number:** 42-1685677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROMEO, VANESSA  
6201 CHAUNCEY ST  
TAMPA, FL 33647 US

**Name and Address of New Registered Agent:**

HAMMONTREE, MARGARET  
105 S. GLEN ARVEN AVENUE  
TEMPLE TERRACE, FL 33617 US

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: MARGARET HAMMONTREE

04/30/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ROMEO, VANESSA  
Address: 6201 CHAUNCEY ST  
City-St-Zip: TAMPA, FL 33647

Title: V ( ) Delete  
Name: HAYDEN, NANCY  
Address: 6107 RAIN HOLLOW CT.  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: S ( ) Delete  
Name: FREY, DONNA  
Address: 11806 N. 51ST ST.  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: T ( ) Delete  
Name: EBANKS, ANGELA  
Address: 11707 NORTH DRIVE  
City-St-Zip: TEMPLE TERRACE, FL 33617

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: HAMMONTREE, MARGARET  
Address: 105 S. GLEN ARVEN AVENUE  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: V (X) Change ( ) Addition  
Name: EBANKS, CHISOLM  
Address: 11707 NORTH DRIVE  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: S (X) Change ( ) Addition  
Name: CHRISTIAN, DAWN  
Address: 8504 RENALD BLVD  
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: T (X) Change ( ) Addition  
Name: HANKIN, JOELLIE  
Address: 9702 CYPRESS POND AVENUE  
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARGARET HAMMONTREE

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date