

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009406

FILED
Apr 14, 2008
Secretary of State

Entity Name: TRI-COUNTY GYMNASTICS BOOSTER CLUB, INC.

Current Principal Place of Business:

5737 OKEECHOBEE BLVD
STE. 201
WEST PALM BEACH, FL 33417 US

New Principal Place of Business:

Current Mailing Address:

5737 OKEECHOBEE BLVD
STE. 201
WEST PALM BEACH, FL 33417 US

New Mailing Address:

FEI Number: 26-1133089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAMBRA, GEORGIANA
5737 OKEECHOBEE BLVD
STE. 201
WEST PALM BEACH, FL 33417 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: C () Delete
Name: ROBBINS, MARK
Address: 5737 OKEECHOBEE BLVD, STE 201
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V () Delete
Name: DAMBRA, GEORGIANA
Address: 5737 OKEECHOBEE BLVD, STE 201
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S () Delete
Name: CUMMINGS, DEBBIE
Address: 5737 OKEECHOBEE BLVD, STE 201
City-St-Zip: WEST PALM BEACH, FL 33417

Title: T () Delete
Name: ZIMMERMAN, ABBY
Address: 5737 OKEECHOBEE BLVD, STE 201
City-St-Zip: WEST PALM BEACH, FL 33417

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 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: ABBY ZIMMERMAN

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04/14/2008

Electronic Signature of Signing Officer or Director

Date