

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010869

FILED
Apr 26, 2009
Secretary of State

Entity Name: STICK IT GYMNASTICS PARENT ASSOCIATION, INC.

Current Principal Place of Business:

6208 S. ORANGE AVE STE 154
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

6208 S. ORANGE AVE STE 154
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 23-3771964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINTON, KATHY
6208 S. ORANGE AVE STE 154
ORLANDO, FL 32809 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: D () Delete
Name: CLINTON, KATHY
Address: 6208 S. ORANGE AVE STE 154
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: DIEKER, LISA
Address: 6208 S. ORANGE AVE STE 154
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: POITIER, MARY
Address: 6208 S. ORANGE AVE STE 154
City-St-Zip: ORLANDO, FL 32809

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: BEACHLER, MARIA
Address: 6208 S. ORANGE AVE STE 154
City-St-Zip: ORLANDO, FL 32809

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: KATHY CLINTON

D

04/26/2009

Electronic Signature of Signing Officer or Director

Date