

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010869

FILED  
Jan 09, 2010  
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:** 26-3771964

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**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:**

AYCOCK, CHARIS  
6208 S. ORANGE AVE STE 154  
ORLANDO, FL 32809 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: CHARIS AYCOCK

01/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: AYCOCK, CHARIS  
Address: 6208 S. ORANGE AVE STE 154  
City-St-Zip: ORLANDO, FL 32809

Title: D  
Name: BOERINGER-HARTNUP, MELODY  
Address: 6208 S. ORANGE AVE STE 154  
City-St-Zip: ORLANDO, FL 32809

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

Title: D  
Name: DELZINGARO, MARTI  
Address: 6208 S. ORANGE AVE STE 154  
City-St-Zip: ORLANDO, FL 32809

I hereby 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 all other like empowered.

SIGNATURE: CHARIS AYCOCK

D

01/09/2010

Electronic Signature of Signing Officer or Director

Date