

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007759

FILED  
Feb 15, 2010  
Secretary of State

**Entity Name:** UNIVERSAL GYMNASTICS BOOSTER, INC

**Current Principal Place of Business:**

640 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953 US

**New Principal Place of Business:**

**Current Mailing Address:**

640 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953 US

**New Mailing Address:**

**FEI Number:** 27-0698845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCCONVILLE, DEAN  
4878 OAKLEY RD  
NORTH PORT, FL 34288 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:** P  
**Name:** MCCONVILLE, DEAN  
**Address:** 4878 OAKLEY RD  
**City-St-Zip:** NORTH PORT, FL 34288 US

**Title:** VP  
**Name:** MCGRAW, LEIGH  
**Address:** 2525 HOBBLEBRUSH DR  
**City-St-Zip:** NORTH PORT, FL 34289 US

**Title:** T  
**Name:** BOETHIG, MICHELE  
**Address:** 2337 CARNATION CT  
**City-St-Zip:** NORTH PORT, FL 34289 US

**Title:** S  
**Name:** OLLERENSHAW, KAREN  
**Address:** 15050 BUSWELL AVE  
**City-St-Zip:** PORT CHARLOTTE, FL 33953 US

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:** MICHELE BOETHIG

T

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date