

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12725

FILED
Mar 23, 2009
Secretary of State

Entity Name: INTERNATIONAL GYMNASTICS ASSOCIATION, INC.

Current Principal Place of Business:

C/O RITA BROWN
740 ORANGE AVE.
ALTAMONTE SPRINGS, FL 33068

New Principal Place of Business:

C/O RITA BROWN
740 ORANGE AVE.
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

C/O RITA BROWN
740 ORANGE AVE.
ALTAMONTE SPRINGS, FL 33068

New Mailing Address:

C/O RITA BROWN
740 ORANGE AVE.
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-2621202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, RITA
740 ORANGE AVE.
ALTAMONTE SPRINGS, FL 32714 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: PD () Delete
Name: BROWN, RITA
Address: 740 ORANGE AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: AVD () Delete
Name: BROWN, JENNIFER L
Address: 2716 DEER BERRY COURT
City-St-Zip: LONGWOOD, FL 32779

Title: VD (X) Delete
Name: STEVENS, MELVIN,
Address: 299 TORPOINT GATE RD.
City-St-Zip: LONGWOOD, FL 32779

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:

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: RITA BROWN

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date