

# 2000 UNIFORM BUSINESS REPORT (UBR)

0047242

DOCUMENT # N15025

1. Entity Name

PALM GOLD GYMNASTICS ASSOCIATION, INC.

FILED

00 AUG -8 AM 11:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1420 RUPP LANE  
LAKE WORTH FL 33460

1420 RUPP LANE  
LAKE WORTH FL 33460-6152

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2760774

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRICK, SHARON  
11744 BANYAN STREET  
PALM BEACH GARDENS FL 33410

Name

JEANNE BEACHLER

Street Address (P.O. Box Number is Not Acceptable)

3733 Valley Park Way

City

LAKE WORTH

FL

Zip Code

33467

8. 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

*[Signature]*

JEANNE BEACHLER

7/27/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
BOADY, DOREEN  
1601 W. TERRACE DRIVE  
LAKE WORTH FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
THEW, LILLIE  
137 YUCATAN DR.  
PALM SPRINGS FL 33461 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
600003368216-018  
-08/23/00--01016--018  
\*\*\*\*\*61.25 \*\*\*\*\*61.25

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
BRODBECK, MAUREEN  
114 LAKE ARBOR DRIVE  
PALM SPRINGS FL 33461 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BEACHLER, JEANNIE  
3733 VALLEY PARK WAY  
LAKE WORTH FL 33467 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
Beachler Jeanne  
3733 Valley Park Way  
Lake Worth, FL. 33467 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
FRICK, SHARON  
11744 BANYAN STREET  
PALM BEACH GARDENS FL 33410 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SP  
The Cleary, Christine  
1 W. Arch. Dr.  
Lake Worth, FL. 33467 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TS ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/27/00 561-964-2233

CR2E037 (9/99)