

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N47559 (2)
 1. Corporation Name
ALLSTAR GYMNASTICS BOOSTER CLUB, INCORPORATED



Principal Place of Business
Bennett, Rhonda
BROWN, BRENDA
1640 S. 8TH ST.
FERNANDINA BEACH FL 32034
US

Mailing Address
1640 S 8TH ST
FERNANDINA BEACH FL 32034

3. Date Incorporated or Qualified **02/25/1992** 3a. Date of Last Report **04/19/1995**

2. Principal Place of Business
21 1640 S. 8th St. 2a. Mailing Address
26 1640 S. 8th St.

Suite, Apt. #, etc.

City & State
23 Fernandina Beach, FL 28 **Fernandina Beach, FL**

Zip
24 32034 25 **US** 29 **32034** 30 **US**

Country

4. FEI Number
59-3164300

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
COLLUPY, SHARON L.
1640 S. 8TH ST.
FERNANDINA BEACH FL 32034

10. Name and Address of New Registered Agent
81 Name Donna Stubits
82 Street Address (P.O. Box Number is Not Acceptable) 1640 S. 8th St.
83 City Fernandina
84 FL 85 Zip Code 32034

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Rhonda J. Bennett, Rhonda J. Bennett - T.** DATE **4-25-96**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BROWN, BRENDA 1631 OCEAN FOREST DRIVE FERNANDINA BEACH FL	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	DP Donna Stubits 4044 Captains Way Amelia Island, FL 32034
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS SYNDER, MARY 1889 SPRINGBROOD RD. FERNANDINA BCH. FL	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	DS Belinda Barrett 17215 1st St N Dr Jacksonville, FL 32226
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT TEAL, LISA 3602 VIA DEL MAR RD. FERNANDINA BEACH FL	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	DOT Rhonda Bennett 13019 Lanier Rd. Jacksonville, FL 32226
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Donna K. Stubits Donna K. Stubits** **4/23/96**
Rhonda J. Bennett Rhonda J. Bennett **4/25/96**

Daytime Phone # **714-1600**

CR2E037 (12/95)