

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91610 017 ****61.25

DOCUMENT # N96000002855

1. Entity Name

FLORIDA GYMNASTICS USA TEAM PARENT ORGANIZATION, INC.

Principal Place of Business

Mailing Address

**1001 JUPITER PARK DRIVE
 JUPITER FL 33458**

**1001 JUPITER PARK DRIVE
 JUPITER FL 33458**

435284



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0664565

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ESKUCHEN, MARTHA S
 14041 US HIGHWAY ONE
 JUNO BEACH FL 33408**

Name

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

City

FL

Zip Code

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, 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 ☒ Delete
 NAME **D ESKUCHEN, MARTHA S**
 STREET ADDRESS **14041 US HIGHWAY ONE**
 CITY-ST-ZIP **JUNO BEACH FL 33408**

TITLE ☐ Change ☒ Addition
 NAME **D Barbara Kelly**
 STREET ADDRESS **1001 Jupiter Park Dr**
 CITY-ST-ZIP **Jupiter, FL 33458**

TITLE ☒ Delete
 NAME **D DOWNS, LESLIE**
 STREET ADDRESS **1001 JUPITER PARK DR**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Change ☒ Addition
 NAME **D Robin Simon**
 STREET ADDRESS **1001 Jupiter Park Dr.**
 CITY-ST-ZIP **Jupiter, FL 33458**

TITLE ☐ Delete
 NAME **DP DEDOMINICIS, NANCY**
 STREET ADDRESS **1001 JUPITER PARK DR**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Change ☒ Addition
 NAME **D Roxanne Nettles**
 STREET ADDRESS **1001 Jupiter Park Dr.**
 CITY-ST-ZIP **Jupiter, FL 33458**

TITLE ☐ Delete
 NAME **DT WEAVER, LORI**
 STREET ADDRESS **1001 JUPITER PARK DR**
 CITY-ST-ZIP **JUPITER FL 33458**

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

TITLE ☒ Delete
 NAME **DV HALL, TIFFANY**
 STREET ADDRESS **1001 JUPITER PARK DR**
 CITY-ST-ZIP **JUPITER FL 33458**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

4-30-02 (5617682-6079)