2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001749

Entity Name: WORLD CLASS GYMNASTICS INC.

FILED May 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11502-1 COLOMBIA PARK DRIVE WEST JACKSONVILLE, FL 32258

Current Mailing Address: New Mailing Address:

11502-1 COLOMBIA PARK DRIVE WEST JACKSONVILLE, FL 32258

FEI Number: 59-3572436 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FRICK, SUSAN GOSS, DALE 1503 MALLARD LANDING BLVD 4750 WASSAIL DR.

JACKSONVILLE, FL 32259 JACKSONVILLE, FL 32257 US

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: DALE GOSS 05/06/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FRICK, SUSAN GOSS, DALE Name: Name: 1503 MALLARD LANDING BLVD Address: 4750 WASSAIL DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete Title: (X) Change () Addition

Name: GOSS, DALE Name: PRESCOTT, JAMIE

Address: 4750 WASSAIL DRIVE Address: 11502-1 COLOMBIA PARK DRIVE WEST

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32258

Title: () Delete Title: (X) Change () Addition MOODY, LAREE ICE, CASSIE Name: Name:

1402 WILKES POINT ROAD 11502-1 COLOMBIA PARK DRIVE WEST Address: Address:

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: JACKSONVILLE, F 32258

Title: TD () Delete Title: TD (X) Change () Addition

Name: GOSSELIN, PATRICIA Name: REZNISEK, CHARMAINE 11502-1 COLOMBIA PARK DRIVE WEST Address: 1935 E. WINDY WAY Address:

City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: JACKSONVILLE, FL 32258

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: DALE GOSS PD 05/06/2008