

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007048

FILED  
Sep 10, 2004  
Secretary of State

Entity Name: INTERNATIONAL RHYTHMIC GYMNASTICS, INC.

**Current Principal Place of Business:**

7580 KESTREL DRIVE  
JACKSONVILLE, FL 32222

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 440207  
JACKSONVILLE, FL 32222

**New Mailing Address:**

FEI Number: 59-3130795

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BEAVER, MAYRA ELISA F  
7580 KESTREL DRIVE  
JACKSONVILLE, FL 32222 US

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

FERNANDEZ, MAYRA E  
7580 KESTREL DRIVE  
JACKSONVILLE, FL 32222 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: MAYRA E. FERNANDEZ

09/10/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: EDP ( ) Delete  
Name: BEAVER, MAYRA ELISA F  
Address: 7580 KESTREL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32222

Title: S ( ) Delete  
Name: RAMOS, DORA L  
Address: 1563 PAWNEE STREET  
City-St-Zip: ORANGE PARK, FL 32065

Title: TD ( ) Delete  
Name: COCHRAN, NITZA T  
Address: 7580 KESTREL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32222

Title: D ( ) Delete  
Name: JUSTICE, KEZIA S  
Address: 1824 NORTH LAURA  
City-St-Zip: JACKSONVILLE, FL 32206

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: EDP (X) Change ( ) Addition  
Name: FERNANDEZ, MAYRA E  
Address: 7580 KESTREL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32222

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 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 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: MAYRA E. FERNANDEZ

PRES

09/10/2004

Electronic Signature of Signing Officer or Director

Date