

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P08000057342

**FILED**  
**May 06, 2009**  
**Secretary of State****Entity Name:** ST. JOHNS GYMNASTICS, INC.**Current Principal Place of Business:**314 COMMERCE LAKE DRIVE  
SUITE 204  
SAINT AUGUSTINE, FL 32092 US**New Principal Place of Business:****Current Mailing Address:**314 COMMERCE LAKE DRIVE  
SUITE 204  
SAINT AUGUSTINE, FL 32092 US**New Mailing Address:****FEI Number:** 26-2792589**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**KISSIRE, CANDACE S  
204 PALMETTO DRIVE  
SAINT AUGUSTINE, FL 32095 US**Name and Address of New Registered Agent:**LANDESS, WENDY L  
204 PALMETTO DRIVE  
SAINT AUGUSTINE, FL 32095 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: WENDY L LANDESS

05/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KISSIRE, CANDACE S  
Address: 204 PALMETTO DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32095 US

Title: V ( ) Delete  
Name: SMITH, BARBARA J  
Address: 4366 RUES LANDING ROAD  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: ST ( ) Delete  
Name: BERKLEY, HEATHER M  
Address: 2861 N. 8TH STREET  
City-St-Zip: ST. AUGUSTINE, FL 32084

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

Title: P (X) Change ( ) Addition  
Name: LANDESS, WENDY L  
Address: 204 PALMETTO DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32095 US

Title: V (X) Change ( ) Addition  
Name: LANDESS, JOHN C  
Address: 204 PALMETTO DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32095 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDY LANDESS

P

05/06/2009

Electronic Signature of Signing Officer or Director

Date