FILE NOW: FILING FEE AFTER AY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

F DA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
ION OF CORPORATIONS

DOCUMENT # P95000043196

1. Corporation Name

Seminole Gymnastics and Dance Ac emy, Inc.

Principal Place of Business
7655 - 131st Street North
Seminole, Florida 34646-4012

Mailing Ad ss

3. Date Incorporated or Qualified: 5/30/95

3a. Date of Last Report:

4. FEI Number: 59-3320493 — ☐ 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

	2. Principal Place of Business		2a. Mailing Address
21	7655 - 131st Street North	26	76 - 131st Street North
	Suite, Apt. #, etc.		Suite #, etc.
22		27	
	City & State		City & State
23	Seminole, Florida	28	Sem nole, Florida
24	Zip 34646-4012	29	Zip 3464 -4012
25	Country US	30	Country US

9. Name and Address of Current Registered A ent

Christine Zimmerman
15606 Gulf Blvd.
Redington Beach, Florida 33708

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1 [illegible] 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 [illegible] 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 607 [illegible] Florida Statutes.

SIGNATURE: ______ Signature, typed or printed name of registered agent and title if applicable ______ DATE

12. OFFICERS AND DIRECTORS

TITLE	Director	☐ DELETE
NAME	Christine Zimmerman	
STREET ADDRESS	15606 Gulf Blvd.	
CITY-ST-ZIP	Redington Beach, FL 33708	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing [illegible] 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 s[illegible]emental 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 [illegible] or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachm[illegible] with an address.

SIGNATURE: [signature] 5/31/96
SIGNATURE AND TYPED OR PRINTED NAME [illegible] SIGNING OFFICER OR DIRECTOR — Date

Daytime Phone #

CS 6/28/96

CR2E034 (12/95)