

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000121207

FILED
Apr 22, 2008
Secretary of State

Entity Name: SOUTHWEST FLORIDA FITNESS, INC.

Current Principal Place of Business:

18151 OLD PELICAN BAY DR.
FT. MYERS BCH, FL 33931

New Principal Place of Business:

13040 LIVINGSTON RD
NO. 18
NAPLES, FL 34105

Current Mailing Address:

18151 OLD PELICAN BAY DR.
FT. MYERS BCH, FL 33931

New Mailing Address:

FEI Number: 26-1429364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEATH, DUSTIN
27087 MATHESON AVE.E, APT. 101
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HEATH, DUSTIN
Address: 18151 OLD PELICAN BAY DR.
City-St-Zip: FT. MYERS BCH, FL 33931

Title: D () Delete
Name: JANITZ, DOTTIE
Address: 18151 OLD PELICAN BAY DR.
City-St-Zip: FT. MYERS BCH, FL 33931

Title: D () Delete
Name: JANITZ, TERRY W
Address: 18151 OLD PELICAN BAY DR.
City-St-Zip: FT. MYERS BCH, FL 33931

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HEATH, DUSTIN
Address: 27087 MATHESON AVE. E, APT. 101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP (X) Change () Addition
Name: JANITZ, DOTTIE
Address: 18151 OLD PELICAN BAY DR.
City-St-Zip: FT. MYERS BCH, FL 33931

Title: VP (X) Change () Addition
Name: JANITZ, TERRY W
Address: 18151 OLD PELICAN BAY DR.
City-St-Zip: FT. MYERS BCH, FL 33931

Title: D () Change (X) Addition
Name: MICHELSEN, CAITLEN
Address: 27087 MATHESON AVE. E, APT 101
City-St-Zip: BONITA SPRINGS, FL 34135 US

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: DOTTIE JANITZ

VP

04/22/2008

Electronic Signature of Signing Officer or Director

_____ Date