2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2004 08:00 AM
Secretary of State

DOCUMENT # S22057

1. Entity Name
BAILEY'S GYM, INC.

Principal Place of Business	Mailing Address
1418 ROMNEY ST JACKSONVILLE, FL 32211 US	PO BOX 8762 JACKSONVILLE, FL 32239 US

02132004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3044934
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BAILEY, DONALD L.
1418 ROMNEY ST
JACKSONVILLE, FL 32211

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000055787
02/18/04-80018-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	BAILEY, DONALD L.
STREET ADDRESS	1418 ROMNEY ST
CITY-ST-ZIP	JACKSONVILLE, FL 32211
TITLE	V
NAME	BAILEY, DAVID, L
STREET ADDRESS	2500 MONUMENT RD #100
CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE	S
NAME	BAILEY, DARRYL
STREET ADDRESS	2500 MONUMENT RD #100
CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald L Bailey 2-17-04 904 7449986
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #