

**2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004024

**Entity Name:** THE NATIONAL INSTITUTE FOR FITNESS AND SPORT, INC.

**Current Principal Place of Business:**

250 UNIVERSITY BLVD  
INDIANAPOLIS, IN 46202

**Current Mailing Address:**

250 UNIVERSITY BLVD  
INDIANAPOLIS, IN 46202

**FEI Number: 31-1130407**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TAYLOR, JERRY W  
Address        250 UNIVERSITY BLVD  
City-State-Zip: INDIANAPOLIS IN 46202

Title            SECRETARY  
Name            BUSK, MICHAEL  
Address        250 UNIVERSITY BLVD  
City-State-Zip: INDIANAPOLIS IN 46202

Title            TREASURER  
Name            SERVAAS, JOAN  
Address        250 UNIVERSITY BLVD  
City-State-Zip: INDIANAPOLIS IN 46202

Title            CHAIRMAN  
Name            BROWN MD, ROBERT  
Address        250 UNIVERSITY BLVD  
City-State-Zip: INDIANAPOLIS IN 46202

*I hereby 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 all other like empowered.*

**SIGNATURE: MICHAEL BUSK**

**SECRETARY**

**04/14/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date