2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005
Secretary of State

DOCUMENT# F04000002997

Entity Name: FITLINXX, INC.

Current Principal Place of Business:

860 CANAL STREET
STAMFORD, CT 06902

New Principal Place of Business:

Current Mailing Address:

860 CANAL STREET
STAMFORD, CT 06902

New Mailing Address:

FEI Number: 06-1370158 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DCEO ( ) Delete
Name: CRAMPTON, DAVID
Address: 860 CANAL STREET
City-St-Zip: STAMFORD, CT 06902

Title: STEO ( ) Delete
Name: ALSWANGER, GEOFFREY
Address: 860 CANAL STREET
City-St-Zip: STAMFORD, CT 06902

Title: D ( ) Delete
Name: CAMHI, KEITH E
Address: 860 CANAL STREET
City-St-Zip: STAMFORD, CT 06902

Title: D ( ) Delete
Name: APPEL, ARTHUR S
Address: 1661 WORCESTER ROAD, SUITE 303
City-St-Zip: FRAMINGHAM, MA 01701

Title: D ( ) Delete
Name: COIT, DAVID M
Address: TWO CITY CENTER, 5TH FLOOR
City-St-Zip: PORTLAN, ME 04101

Title: D ( ) Delete
Name: CRAMPTON, DAVID
Address: 860 CANAL STREET
City-St-Zip: STAMFORD, CT 06902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GEOFFREY ALSWANGER STEO 04/05/2005

Electronic Signature of Signing Officer or Director — Date