2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# F04000005081

Entity Name: FITNESS SYSTEMS, INC.

Current Principal Place of Business:

210 GOTHIC CT.
FRANKLIN, TN 37067

New Principal Place of Business:

4771 BAYOU BOULEVARD
C-11
PENSACOLA, FL 32503

Current Mailing Address:

210 GOTHIC CT.
FRANKLIN, TN 37067

New Mailing Address:

FEI Number: 62-1237071 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITE, PAUL
4771 BAYOU BLVD., C-11
PENSACOLA, FL 32503 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: C ( ) Delete
Name: FREEMAN, ROD
Address: 210 GOTHIC CT.
City-St-Zip: FRANKLIN, TN 37067

Title: VCP ( ) Delete
Name: CLARK, JOHNNY
Address: 210 GOTHIC CT.
City-St-Zip: FRANKLIN, TN 37067

Title: D ( ) Delete
Name: WILFORD, WILL
Address: 210 GOTHIC CT.
City-St-Zip: FRANKLIN, TN 37067

Title: VP (X) Delete
Name: FRAZIER, JON
Address: 210 GOTHIC CT.
City-St-Zip: FRANKLIN, TN 37067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition
Name: FRAZIER, JON
Address: 210 GOTHIC COURT
City-St-Zip: FRANKLIN, TN 37067

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

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: JOHNNY CLARK VCP 04/16/2008

Electronic Signature of Signing Officer or Director — Date