

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000183

Entity Name: FITNESS RESOURCE OF VIRGINIA, INC.

FILED
Mar 26, 2009
Secretary of State

Current Principal Place of Business:

2751 DORR AVE
FAIRFAX, VA 22031

New Principal Place of Business:

22714 GLENN DR
SUITE 130
STERLING, VA 20164

Current Mailing Address:

2751 DORR AVE
FAIRFAX, VA 22031

New Mailing Address:

22714 GLENN DR
SUITE 130
STERLING, VA 20164

FEI Number: 54-0900111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CP () Delete
Name: NEES, DAVID E
Address: 10713 KELLEY DR
City-St-Zip: FAIRFAX, VA 22030

Title: D () Delete
Name: RENFROW, STEVEN S
Address: 8153 SILVERBERRY WAY
City-St-Zip: VIENNA, VA 22182

Title: DP () Delete
Name: WHEELER, ROBERT P JR
Address: 1454 WAGGAMAN CIRCLE
City-St-Zip: MCLEAN, VA 22101

Title: V () Delete
Name: COLLS, ROBERT
Address: 400 HOUNDS CHASE
City-St-Zip: YORKTOWN, VA 23693

Title: V () Delete
Name: LONG, KEVIN
Address: 701 KENTLAND DRIVE
City-St-Zip: GREAT FALLS, VA 22066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change () Addition
Name: NEES, DAVID B
Address: 44237 CESSNA LANE
City-St-Zip: ASHBURN, VA 20147

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 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: DAVID B. NEES

ST

03/26/2009

Electronic Signature of Signing Officer or Director

_____ Date