

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003860

FILED
Apr 28, 2006
Secretary of State

Entity Name: THE FITNESS COMPANY MANAGEMENT GROUP

Current Principal Place of Business:

110 SE 6TH STREET
7TH FLOOR
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

118 HEADQUARTERS PLAZA
MORRISTOWN, NJ 07960

New Mailing Address:

FEI Number: 22-3493633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANCEL, ROBERT
110 SE 6TH STREET
7TH FLOOR
FT LAUDERDALE, FL 33301 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: CEO () Delete
Name: WESTGATE, ROSS
Address: 118 HEADQUARTERS PLAZA
City-St-Zip: MORRISTOWN, NJ 07960

Title: D () Delete
Name: BENNETT, JOHN W
Address: 118 HEADQUARTERS PLAZA
City-St-Zip: MORRISTOWN, NJ 07960

Title: D (X) Delete
Name: HALL, RICHARD L
Address: 118 HEADQUARTERS PLAZA
City-St-Zip: MORRISTOWN, NJ 07960

Title: D () Delete
Name: EMMETT, PEARSON
Address: 118 HEADQUARTERS PLAZA
City-St-Zip: MORRISTOWN, NJ 07960

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHERI COHEN

Electronic Signature of Signing Officer or Director

CONT

04/28/2006

_____ Date