2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006756

FILED Sep 06, 2005 Secretary of State

Entity Name: FITNESS PRO, INC. **Current Principal Place of Business: New Principal Place of Business:** 30 W. MONTGOMERY CROSSROADS SAVANNAH, GA 31406 **Current Mailing Address: New Mailing Address:** 30 W. MONTGOMERY CROSSROADS P.O. BOX 1870 SAVANNAH, GA 31406 MILLEDGEVILLE, GA 31059 US FEI Number: 58-2037872 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SULLIVAN, PATRICK S 2748 CAPITAL CIRCLE, NE, UNIT F TALLAHASSEE, FL 32308 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change () Addition DRAKE, PAUL G DRAKE, PAUL G Name: Name: 30 W. MONTGOMERY CROSSROADS 30 W. MONTGOMERY CROSSROADS Address: Address: City-St-Zip: SAVANNAH, GA 31406 City-St-Zip: SAVANNAH, GA 31406 Title: ٧S Title: () Change () Addition () Delete Name: SULLIVAN, PATRICK S Name: 30 W. MONTGOMERY CROSSROADS Address: Address: SAVANNAH, GA 31406 City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete Name: LEE, TOMPKINS R Name: 30 W. MONTGOMERY CROSSROADS Address: Address: City-St-Zip: City-St-Zip: SAVANNAH, GA 31406

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: PATRICK S. SULLIVAN VS 09/06/2005