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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J41032 1. Corporation Name

THE FITNESS COACH, INC.

Principal Place of Business Mailing Address						AD HELE RIDIE COLC COL	n nais cisti	idi) didi) iddi
600 N. LAKE DESTINY RD		600 N LAKE DESTINY RD			,			
MAITLAND FL 32751-4124		C/O SHERATON ORLANDO NORTH HOTEL			DO NOT WIDE	TE (A) T(IIIO OD	A C F	
**		MAITLAND FL 32751	MAITLAND FL 32751 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
		US			11/05/1986			ĺ
2 Principal D	lace of Business	2a. Mailing Address			4. FEI Number		Ani	olied For
- ¬ '	race of business	26 Washing Address			59-2739608			Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				8.75 A		
22		27			5. Certifcate of Status Desired	_ "	Fee Re	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
23		28		Trust Fund Contribution		Added to	o Fees	
Zip	Country	Zip	Country		8. This corporation owes the curre	· <u>-</u>		_
24	25	_ 	30		Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered Age	nt	
DAN	IDELL IAMES IL ID		81 Na	me				
	IDELL, JAMES H. JR. N. LAKE DESTINY ROAD		82 St	eet Addres	ss (P.O. Box Number is Not Accepta	ible)		
	TLAND FL 32751							
IMA	ILAND FL 32/31		83					}
			84 Cit	у		FL	5 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508. Florida Statutes	s, the above-nar	ned corpor	ration submits this statement for the	purpose of cha	nging its	registered
office or r	egistered agent or both in the State of familiar with, and accept the obligat	of Florida: Such change was aut	thorized by the o	corporation	's board of directors.'I hereby accep	t the appointme	ant/as reg	jistered
SIGNATURE		- 100 W - 100			- Carterian	DATE		
12.	Signature, typed or printed name of registered agent		Registered Agent signs	ature required v	ADDITIONS/CHANGES TO OF		IRECTO	RS IN 12
TITLE	DP	□ DELETE	1.1 TITLE		7.55.11011070117110 <u>-0</u> .10 0.1		Change	Addition
NAME	RANDELL, JAMES H. JR.		1.2 NAME					_
STREET ADDRESS	ADD N. LAWE DECTING DD		1.3 STREET ADDR	RESS				l
CITY-ST-ZIP	MAITLAND FL		1.4 C/TY-ST-ZIP					
TITLE	V	☐ DELETE	2.1 TITLE] Change	Addition
NAME	RANDELL, KATHY L.		2.2 NAME	l				į
STREET ADDRESS	600 N. LAKE DESTINY RD		2.3 STREET ADDR	RESS				
CITY+ST-ZIP	MAITLAND FL		2.4 CITY-ST-ZIP					į
TITLE	WATER TE	☐ DELETE	3.1 TITLE		· -] Change	Addition
NAME			3.2 NAME	1				
STREET ADDRESS			3.3 STREET ADDR	RESS				ĺ
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAME]
STREET ADDRESS			4.3 STRÊET ADDR	RESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE] Change	☐ Addition
NAME			5.2 NAME					1
STREET ADDRESS	1		5.3 STREET ADDR	RESS				ļ
CITY-ST-ZIP	1	•	5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE	$\neg \uparrow \neg$	<u>, </u>) Change	Addition
NAME			6.2 NAME	ĺ				i

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CMY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP