2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L69252

Entity Name: PHYSICALLY FIT OF JAX, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

7200 NORMANDY BLVD

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JACKSONVILLE, FL 32205 US

Current Mailing Address: New Mailing Address:

7200 NORMANDY BLVD

JACKSONVILLE, FL 32205 US

FEI Number: 59-3007320 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MYERS, CHERYL

8526 GRAYBAR DRIVE

JACKSONVILLE, FL 32221 US

MYERS, CHERYL

14698 MOORE BRANCH ROAD

JACKSONVILLE, FL 32234 US

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: CHERYL MYERS 04/27/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: MYERS, CHERYL Name: MYERS, CHERYL

Address: 8526 GRAYBAR DRIVE Address: 14698 MOORE BRANCH ROAD City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: JACKSONVILLE, FL 32234

Title: VP () Delete Title: () Change () Addition

 Name:
 RICE, BRANDON L
 Name:

 Address:
 7986 SEAHAVEN CT
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:

Title: 2VP (X) Delete Title: () Change () Addition

 Name:
 YARBROUGH, MARLA M
 Name:

 Address:
 5596 WANDERING TRAIL
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32219
 City-St-Zip:

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: BRANDON RICE VP 04/27/2005