2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# N01000002477

Entity Name: COCOA BEACH HEALTH & FITNESS, INC.

Current Principal Place of Business:

1355 NORTH ATLANTIC AVE
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

1355 NORTH ATLANTIC AVE
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-3753510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TERZIEFF, YORDON G
1275 N. ATLANTIC AVE
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

TURK, DONNA
1275 N. ATLANTIC AVE
COCOA BEACH, FL 32931 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: DONNA TURK 04/29/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TURK, JOHN S
Address: 1275 NORTH ATLANTIC AVE.
City-St-Zip: COCOA BEACH, FL 32931

Title: VD ( ) Delete
Name: TURK, DONNA J
Address: 1275 NORTH ATLANTIC AVE.
City-St-Zip: COCOA BEACH, FL 32931

Title: D ( ) Delete
Name: PERKINS, CLAY C
Address: 1325 N. ATLANTIC AVENUE SUITE 11W
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TURK, DONNA J
Address: 1275 NORTH ATLANTIC AVE.
City-St-Zip: COCOA BEACH, FL 32931

Title: D (X) Change ( ) Addition
Name: TURK, DONNA J
Address: 1275 NORTH ATLANTIC AVE.
City-St-Zip: COCOA BEACH, FL 32931

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA TURK P 04/29/2004
Electronic Signature of Signing Officer or Director Date