


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # N02000000485	
1. Entity Name BODY & SOUL YOGA COOPERATIVE, INC.	

Principal Place of Business 1919 1/2 MORRILL ST SARASOTA, FL 34236	Mailing Address 1919 1/2 MORRILL ST SARASOTA, FL 34236
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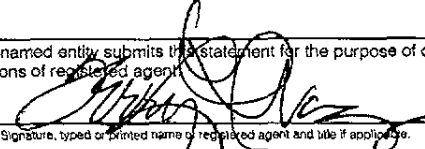
DO NOT WRITE IN THIS SPACE



01272004 No Chg-NP CR2E037 (10/03)

4. FEI Number 03-0398053	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WAGNER, TERRY LYNN 1919 1/2 MORRILL ST SARASOTA, FL 34236	DO NOT WRITE IN THIS SPACE
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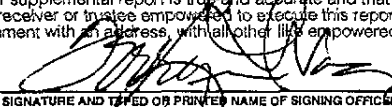
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 2/9/04
(NOTE: Registered Agent signature required when reinstating)	

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WAGNER, TERRY LYNN 1919 1/2 MORRILL ST SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S RITER, MICHAEL 591 HIBISCUS WAY LONGBOAT KEY, FL 34228
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MARTIN, JAYE 4006 RADNER PL SARASOTA, FL 34233
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BEAR, AUDREY 99 S. LINKS AVE SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STEWART, JOANIE 2349 CONSTITUTION BLVD SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DEGENNARO, RICHARD 988 BLVD OF THE ARTS #1414 SARASOTA, FL 34236

U00000051881
02/16/04-80069-020 61.25

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12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	TERRY LYNN WAGNER Date 2/9/04 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	