## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007383

FILED Mar 08, 2012 Secretary of State

Entity Name: FITNESS AGILITY STRENGTH TECHNIQUE CAMP, INC.

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

6919 W BROWARD BLVD. #235

PLANTATION, FL 33317

Current Mailing Address: New Mailing Address:

6919 W BROWARD BLVD. #235 PLANTATION, FL 33317

FEI Number: 20-8339666 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:

MURPHY, MELVIN 5456 SOUTHWEST 191ST TERRACE MIRAMAR, FL 33029 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: MURPHY, MELVIN J Address: 5456 SW 191 TERRACE City-St-Zip: MIRAMAR, FL 33029

Title: DST

Name: ALEXANDER, AIMEE Address: 8013 NW 102 WAY City-St-Zip: TAMARAC, FL 33321

Title: M

Name: HATCHER, MORRIS

Address: 15412 SOUTHWEST 18TH STREET

City-St-Zip: MIRAMAR, FL 33027

Title: M

Name: JENKINS, JAMES
Address: 6919 W. BROWARD BLVD

City-St-Zip: PLANTATION, FL 33317

Title: N

Name: LATIMORE, DENVER
Address: 704 WEST STRAFORD DRIVE
City-St-Zip: CHANDLER, AR 85225

Title: N

Name: HOLMES, DAVID Address: 1220 NW 157 AVE

City-St-Zip: PEMBROKE PINES, FL 33028

I hereby 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 all other like empowered.

SIGNATURE: AIMEE ALEXANDER DST 03/08/2012