2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N10501

FILED Jan 16, 2003 Secretary of State

Entity Name: DOWNTOWN ATHLETIC CLUB OF ORLANDO, INC.

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

540 TIMBER RIDGE DR LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

P.O. BOX 4062

ORLANDO, FL 32802 US

FEI Number: 59-2632163 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:

FERGUSON, SHELLEY 540 TIMBER RIDGE DR LONGWOOD, FL 32779

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:

Date

Address:

City-St-Zip:

Electronic Signature of Registered Agent

401 W. COLONIAL DR 2

LONGWOOD, FL 32779

OFFICERS AND DIRECTORS:

ORLANDO, FL 32819

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete (X) Change () Addition LANDON, CHIP LANDON, CHIP Name: Name: 670 MOSSY BRANCH CT Address: 1721 ALAMEDA AVE Address: City-St-Zip: ORLANDO, FL 32779 City-St-Zip: ORLANDO, FL 32802

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

Name: LANDRY, Name: LANDRY, DONALD C

Address: 7061 GRAND NATIONAL DRIVE #138 Address: 7061 GRAND NATIONAL DRIVE #138

City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: () Delete Title: DIR (X) Change () Addition RANSON, RANDY RANSON, RANDY Name: Name:

401 W. COLONIAL DR 2 Address: City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL

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

Name: BROPKIN, STUART Name: DROPKIN, STUART 1355 ORANGE AVE #4 1355 ORANGE AVE #4 Address: Address: City-St-Zip: ORLANDO, FL 32789 City-St-Zip: ORLANDO, FL 32789

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

VITALE, GLENN CULLEN, JOHN Name: Name: 201 E PINE ST., #801 911 LITTLE BEND ROAD Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ORLANDO, FL 32801

Title: () Delete Title: (X) Change () Addition PALMER, MELYNN FERGUSON, SHELLEY Name: Name: Address: 8418 SHADY GLEN DR Address: 540 TIMBER RIDGE DRIVE

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: SHELLEY FERGUSON **EXDR** 01/16/2003