

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # N94000000754

1. Entity Name

BODY DYNAMICS OF BREVARD, INC.



Principal Place of Business

1425 HIGHLAND AVE
MELBOURNE FL 32935
US

Mailing Address

1425 HIGHLAND AVE
MELBOURNE FL 32935
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-3225618

Applied For

Not Applied

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEEMHOFF, JAMES H.
86 HIGHLAND DR
INDIALANTIC FL 32903

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
STD
BAUER, DEE LEE
2046 REDWOOD CIR.,
PALM BAY FL 32905

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
HARNER, MICHAEL
31 DERBY ST.
COCOA FL 32922

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SAAL, TRACY
1906 SEAGRAPE ST, NE
PALM BAY FL 32905

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TM
OHMAN, DIANE
1824 WOODBERRY CIRCLE
MELBOURNE FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
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CITY - ST - ZIP
☐ Change ☐ Add
U00000532143
05/06/06-80073-014 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Dee Lee Bauer

DEE LEE BAUER

4/17/06 321-676-1400