

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000067444

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: ROBIN'S BIKES & FITNESS, INC.

**Current Principal Place of Business:**

11166 EMERALD COAST PKY  
MIRAMAR BEACH, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

11166 EMERALD COAST PKY  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

FEI Number: 59-3655011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILKES, ROBIN  
11166 EMERALD COAST PKY  
DESTIN, FL 32550 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: WILKES, ROBIN  
Address: 11166 EMERALD COAST PKY  
City-St-Zip: DESTIN, FL 32550

Title: VP ( ) Delete  
Name: YANORA, AMY L  
Address: 331 OLEANDER AVE  
City-St-Zip: DESTIN, FL 32541

Title: S ( ) Delete  
Name: LOEFFLER, BECKY  
Address: 305 STAHLMAN AVE  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBIN WILKES

PT

01/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date