2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P00000090813

1. Entity Name
FITNESS 3 INCORPORATED

Principal Place of Business	Mailing Address
970 14TH LANE	970 14TH LANE
VERO BEACH, FL 32960	VERO BEACH, FL 32960

03072005   No Chg-P   CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For
65-1006328		Not Applicable
5. Certificate of Status Desired	☐	**$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ERNST, MICHAEL
970 14TH LANE
VERO BEACH, FL 32960

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution.	☐	**$5.00** May Be Added to Fees

U00000257314
03/09/05-80050-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ERNST, MICHAEL
STREET ADDRESS	970 14TH LANE
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	D
NAME	FLICKINGER, KEN
STREET ADDRESS	970 14TH LANE
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 607, 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: _____   Michael Ernst - officer 3-7-05   (772) 778-7867

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #