

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000103956

1. Entity Name
FITNESS EQUIPMENT HEADQUARTERS, INC.**FILED**
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90055 028 ***150.00

Principal Place of Business

**5 CARLSON COURT
PALM COAST FL 32137**

Mailing Address

**5 CARLSON COURT
PALM COAST FL 32137**

2. Principal Place of Business

124 Flagler Plaza Drive
Suite, Apt. #, etc.

3. Mailing Address

124 Flagler Plaza Drive
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Palm Coast, FL

City & State

Palm Coast, FL

4. FFI Number

59 3682389

Additional Fee

Not Applicable

Zip

32137

Country

USA

Zip

32137

Country

USA5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SAVY, BENJAMIN
2825 NORTH OCEANSHORE BOULEVARD
BEVERLY BEACH FL 32136**

7. Name and Address of New Registered Agent

Name

Robert D. Dowling

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

124 Flagler Plaza Dr.

City

Palm Coast

Zip

32137

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.

SIGNATURE

Signature, typed or printed name of registered agent and new principal officer.

President, Robert D. Dowling

(NOTE: If a new agent is provided, registered agent must be added.)

4/24/019. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change	☒ Addition
President	Robert D. Dowling	124 Flagler Plaza Dr.	Palm Coast, FL 32137		
Vice President	Carolyn S. Dowling	124 Flagler Plaza Dr.	Palm Coast, FL 32137		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 11 or Block 12 if changed, or on an attachment with an address, with a letter I am empowered.

SIGNATURE:

Carolyn S. Dowling, Carolyn S. Dowling, VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**4/24/01****904/439-6056**

CR2F034 (10.00)