

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009077

FILED
Apr 30, 2005
Secretary of State

Entity Name: IMPACT FITNESS CLINIC, INC.

Current Principal Place of Business:

10530-10540 LAKE STREET CHARLES BLVD
RIVERVIEW, FL 33569

New Principal Place of Business:

10530 LAKE STREET CHARLES BLVD
RIVERVIEW, FL 33569

Current Mailing Address:

10530-10540 LAKE STREET CHARLES BLVD
RIVERVIEW, FL 33569

New Mailing Address:

10530 LAKE STREET CHARLES BLVD
RIVERVIEW, FL 33569

FEI Number: 03-0380212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC DERMOTT, MIKE
791 WEST LUMSDEN ROAD
BRANDON, FL 33511 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: P () Delete
Name: PARKS, STEPHEN T
Address: 10530-10540 LAKE STREET CHARLES BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: VP () Delete
Name: SKUSA, BRIAN
Address: 10530-10540 LAKE STREET CHARLES BLVD
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARKS, STEPHEN T
Address: 10530 LAKE STREET CHARLES BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: VP (X) Change () Addition
Name: SKUSA, BRIAN
Address: 10530 LAKE STREET CHARLES BLVD
City-St-Zip: RIVERVIEW, FL 33569

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN SKUSA

VP

04/30/2005

Electronic Signature of Signing Officer or Director

Date