

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000010445

Entity Name: OCEAN FITNESS, INC.

FILED
May 17, 2005
Secretary of State

Current Principal Place of Business:

652 NE OCEAN BLVD
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

652 NE OCEAN BLVD
STUART, FL 34996

New Mailing Address:

14 PERRIWINKLE LANE
STUART, FL 34996

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCLANE, FLETCHER L
14 PERRIWINKLE LANE
STUART, FL 34996 US

Name and Address of New Registered Agent:

MUIR, BONNIE J
14 PERRIWINKLE LANE
STUART, FL 34996 US

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: BONNIE J. MUIR

05/17/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCLANE, FLETCHER L
Address: 14 PERRIWINKLE LANE
City-St-Zip: STUART, FL 34996

Title: D (X) Delete
Name: MUIR, BONNIE
Address: 729 S DEARBORN
City-St-Zip: CHICAGO, IL 60605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MUIR, BONNIE J
Address: 14 PERRIWINKLE LANE
City-St-Zip: STUART, FL 34996

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

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: BONNIE J. MUIR

PRES

05/17/2005

Electronic Signature of Signing Officer or Director

Date