2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013351

Entity Name: RIVIERA FITNESS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
2500 S. FERDON CRESTVIEW, FL 32536	

Current Mailing Address:	**New Mailing Address:**
4725 SOUTH HOLLADAY BLVD 220 SALT LAKE CITY, UT 84117	4725 S HOLLADAY BLVD #220 SALT LAKE CITY, UT 84117

FEI Number: 01-0621737   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
RAGAS, JULIE 99 EGLIN PARKWAY #1C FORT WALTON BEACH, FL 32548 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: _____

        Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title:	P ( ) Delete	Title:	( ) Change ( ) Addition
Name:	RICE, REYNOLD T	Name:	
Address:	4725 SO. HOLLADAY BLVD. #220	Address:	
City-St-Zip:	SALT LAKE CITY, UT 84117	City-St-Zip:	

Title:	ST ( ) Delete	Title:	( ) Change ( ) Addition
Name:	RICE, SCOTT L	Name:	
Address:	4725 SO. HOLLADAY BLVD. #220	Address:	
City-St-Zip:	SALT LAKE CITY, UT 84117	City-St-Zip:	

Title:	VP ( ) Delete	Title:	( ) Change ( ) Addition
Name:	RAGAS, JULIE	Name:	
Address:	99 EGLIN PARKWAY #1C	Address:	
City-St-Zip:	FORT WALTON BEACH, FL 32548	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: JULIE RAGAS   VP   01/29/2009

        Electronic Signature of Signing Officer or Director   Date