

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000028436

Entity Name: GEOFITNESS, INC.

FILED  
Jan 08, 2007  
Secretary of State

## Current Principal Place of Business:

3959 IRMA SHORES DRIVE  
ORLANDO, FL 32817

## New Principal Place of Business:

## Current Mailing Address:

12565 RESEARCH PARKWAY  
SUITE 300  
ORLANDO, FL 32826

## New Mailing Address:

FEI Number: 61-1408731      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, DEBBY  
3959 IRMA SHORES DRIVE  
ORLANDO, FL 32817      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: D ( ) Delete  
Name: MITCHELL, DEBBY  
Address: 3959 IRMA SHORES DRIVE  
City-St-Zip: ORLANDO, FL 32817

Title: D ( ) Delete  
Name: BANTNER, SEAN C  
Address: 12565 RESEARCH PARKWAY, SUITE 300  
City-St-Zip: ORLANDO, FL 32826

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O (X) Change ( ) Addition  
Name: CORDIER, MICHAEL J MR.  
Address: 2570 CORAL WAY  
City-St-Zip: MALABAR, FL 32950

Title: O ( ) Change (X) Addition  
Name: SUCHOSKI, PAUL  
Address: 12565 RESEARCH PARKWAY, SUITE #300  
City-St-Zip: ORLANDO, FL 32826

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBBY MITCHELL

D

01/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date