2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006
Secretary of State

DOCUMENT# P02000128643

Entity Name: BODY LOGIC INSTITUTE OF FLORIDA, INC.

Current Principal Place of Business:

2510 SOUTH U.S. 1
SUITE C
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

2510 SOUTH U.S. 1
SUITE C
ST. AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 13-4233984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DARNOLD, SUSAN J
129 15TH STREET
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

DARNOLD, SUSAN J
3397 KINGS RD. SOUTH
ST. AUGUSTINE, FL 32086 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: SUSAN J. DARNOLD 04/21/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DARNOLD, SUSAN J
Address: 129 15TH STREET
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: V ( ) Delete
Name: DARNOLD, JAMES L
Address: 129 15TH STREET
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DARNOLD, SUSAN J
Address: 3397 KINGS RD. SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: V (X) Change ( ) Addition
Name: DARNOLD, JAMES L
Address: 3397 KINGS RD. SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32086

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: SUSAN J. DARNOLD PD 04/21/2006
Electronic Signature of Signing Officer or Director Date