

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040547

FILED  
Jul 15, 2004  
Secretary of State

**Entity Name:** SOUTHERN WOMEN'S HEALTH AND FITNESS, INC.

**Current Principal Place of Business:**

1610 SUSIE CIRCLE  
RUSKIN, FL 33570

**New Principal Place of Business:**

**Current Mailing Address:**

1610 SUSIE CIRCLE  
RUSKIN, FL 33570

**New Mailing Address:**

**FEI Number:** 55-0826330

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GILLESPIE, SANDRA L  
1610 SUSIE CIRCLE  
RUSKIN, FL 33570

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

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

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

Title: MRS. ( ) Change (X) Addition  
Name: GILLESPIE, SANDRA L PRES&SE  
Address: 1610 SUSIE CIRCLE  
City-St-Zip: RUSKIN, FL 33570

Title: MRS. ( ) Change (X) Addition  
Name: HEINMILLER, PEGGY L VPRES&T  
Address: 1613 SUSIE CIRCLE  
City-St-Zip: RUSKIN, FL 33570

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:** SANDRA GILLESPIE

PRES

07/15/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date