

FILED
Jun 02, 2004 8:00 am
Secretary of State

05-05-2004 90226 013 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000071058			
1. Entity Name TOTAL NUTRITION AND G&M GYM, INC.			
Principal Place of Business 147 W. INTERNATIONAL SPEEDYWAY BLVD. DAYTONA BEACH, FL 32114		Mailing Address 147 W. INTERNATIONAL SPEEDYWAY BLVD. DAYTONA BEACH, FL 32114	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 83-0363017		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NEVIASER, JULIUS S CPA 222 OAKRIDGE BLVD. STE C DAYTONA BEACH, FL 32118		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! - FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEBENSERGER, MARK 209 ARLINGTON WAY ORMOND BEACH, FL 32176 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACDOWELL, GAREY L 2354 GREEN STREET SOUTH DAYTONA, FL 32119 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____ SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 04-28-04 (386) 238-0244 Date Daytime Phone #	

ATTACHMENT
10425993
170300071058

FTD ADDRESS CHANGE

An address change here changes your address on the FTD coupons only.

TEAR OFF HERE

New Address _____
City _____ Zip _____
State _____
Telephone Number () _____

Form 8109-C (Rev. 12-2002)

Do not write beyond this line

Employer Identification Number (EIN)

83-0363017

121212 3 6

OMB No. 1545-0257

18

TOTAL NUTRITION AND GYM INC
147 W INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH FL 32114

INTERNAL REVENUE SERVICE CENTER
AUSTIN, TX 73301

Send FTD Address Change and correspondence to the IRS address above.