

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106993

FILED
Apr 29, 2007
Secretary of State

Entity Name: GOLDEN YEARS HEALTH CLUB, INC.

Current Principal Place of Business:

2886 TAMIAMI TRAIL
SUITE 5
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

2886 TAMIAMI TRAIL
SUITE 5
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 20-3236472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDSEY, BETH
2086 ALLIANCE AVE.
NORTHPORT, FL 34286 US

Name and Address of New Registered Agent:

LINDSEY, BETH
2864 OCEANSIDE STREET
NORTHPORT, FL 34286 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: BETH LINDSEY

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LINDSEY, BETH
Address: 2086 ALLIANCE AVENUE
City-St-Zip: NORTHPORT, FL 34286

Title: T () Delete
Name: LINDSEY, BETH
Address: 2086 LINDSEY AVENUE
City-St-Zip: NORTHPORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LINDSEY, BETH
Address: 2864 OCEANSIDE STREET
City-St-Zip: NORTHPORT, FL 34286

Title: T (X) Change () Addition
Name: LINDSEY, BETH
Address: 2864 OCEANSIDE STREET
City-St-Zip: NORTHPORT, FL 34286

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: BETH LINDSEY

P

04/29/2007

Electronic Signature of Signing Officer or Director

Date