

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143181

Entity Name: DRF GYMS, INC.

FILED  
Apr 26, 2006  
Secretary of State

## Current Principal Place of Business:

210 PALMETTO STREET  
NEW SMYRNA BEACH, FL 32168

## New Principal Place of Business:

4645 CLYDE MORRIS BLVD.  
SUITE 404  
PORT ORANGE, FL 32129

## Current Mailing Address:

210 PALMETTO STREET  
NEW SMYRNA BEACH, FL 32168

## New Mailing Address:

FEI Number: 20-3765090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLETCHER, SARA  
210 PALMETTO STREET  
NEW SMYRNA BEACH, FL 32168 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: P, S ( ) Delete  
Name: FLETCHER, SARA  
Address: 210 PALMETTO STREET  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, S (X) Change ( ) Addition  
Name: FLETCHER, SARA A P  
Address: 210 PALMETTO STREET  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V.P ( ) Change (X) Addition  
Name: FLETCHER, MARTIN R V.P.  
Address: 210 PALMETTO ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: SARA A. FLETCHER

P

04/26/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date