

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000070773

FILED
Jan 29, 2009
Secretary of State**Entity Name:** IRONSPORT AMERICA HEALTH & FITNESS, INC.**Current Principal Place of Business:**2618 BOGGY CREEK RD.
KISSIMMEE, FL 34744**New Principal Place of Business:****Current Mailing Address:**102 WAKEFIELD DR.
INDIAN HARBOUR BEACH, FL 32937**New Mailing Address:****FEI Number:** 02-0798323**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAY, JAMES A PRESIDE
1393 BENT PALM DR.
MERRITT ISLAND, FL 32952 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**OFFICERS AND DIRECTORS:****Title:** PVST () Delete
Name: DAY, JAMES A PRESIDE
Address: 1393 BENT PALM DR
City-St-Zip: MERRITT ISLAND, FL 32952**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP () Change (X) Addition
Name: DAY, PAMELA H
Address: 102 WAKEFIELD DR.
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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: PAMELA H. DAY

VP

01/29/2009

Electronic Signature of Signing Officer or Director_____
Date