

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050218

Entity Name: HOMEBODY FITNESS INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

1704 NW 100TH DRIVE
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

1704 NW 100TH DRIVE
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 45-0594548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARFAIT, JUDE
1704 NW 100TH DRIVE
GAINESVILLE, FL 32606 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PARFAIT, JUDE
Address: 1704 NW 100TH DRIVE
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: PARFAIT, DIANNA
Address: 1704 NW 100TH DRIVE
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PARFAIT, JUDE MR.
Address: 1704 NW 100TH DRIVE
City-St-Zip: GAINESVILLE, FL 32606

Title: SEC (X) Change () Addition
Name: PARFAIT, DIANA MRS.
Address: 1704 NW 100TH DRIVE
City-St-Zip: GAINESVILLE, FL 32606

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: JUDE PARFAIT

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date