

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000029845

Entity Name: NINE MILE FITNESS, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2101 BARRANCAS AVE  
PENSACOLA, FL 32502 US

**New Principal Place of Business:**

**Current Mailing Address:**

2101 BARRANCAS AVE  
PENSACOLA, FL 32502 US

**New Mailing Address:**

FEI Number: 26-4595238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOFTIN, PHILLIP T  
2101 BARRANCAS AVE  
PENSACOLA, FL 32502 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: P  
Name: LOFTIN, PHILLIP T  
Address: 2101 BARRANCAS AVE  
City-St-Zip: PENSACOLA, FL 32502 US

Title: VP  
Name: STEPHENS, BJ  
Address: 2101 BARRANCAS AVE  
City-St-Zip: PENSACOLA, FL 32502 US

Title: T  
Name: TUCKER, TERESEA A  
Address: 2101 BARRANCAS AVE  
City-St-Zip: PENSACOLA, FL 32502 US

I hereby 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 all other like empowered.

SIGNATURE: PHILLIP LOFTIN

P

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date