FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 12 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000082805 (1)

FITNESS INSIDE AND OUT, INC.

Principal Place 4947 TAMIAMI SUITE 206 NAPLES FL 339	TRAIL NORTH		4947 T Suite	Mailing Address 4947 TAMIAMI TRAIL NORTH SUITE 206 NAPLES FL 34103-3015							
								3. Date Incorporated or Qualified 11/17/1994		ate of Last Ro)1/1996	eport
2. Principal P	lace of Busir	ness	├ ₁	2a. Mailing Address 26				4. FEI Number 65-0451769	FEI Number Applied For 65-0451769 Not Applicable		
Suite, Apl	#, etc.		Sı	Suite, Apt. #, etc.				5. Certificate of Status Desired Security Securi			
City & State	e		C	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Z(p 24	Zip Country			Zip Country			1	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
[9, Name and Address of Current Registered A							10. Name and Address of New Registered Agent			
PASSIDOMO, KATHLEEN C 800 LAUREL OAK DR. SUITE 400 NAPLES FL 33963-2738						81 82 83	Street A	dress (P.O. Box Number is Not Acceptable)			
						84		FL 85 Zip Code			
office or r agent. I a SIGNATURE	am familiar w	or printed name of register	obligations of, S red agent and tale it a	ection 607.0505, I HENR opticable (NI	Florida Sta R TE: Registere	Tule.	s rollin	orporation submits this statement for the pration's board of directors. I hereby acce	DATE	97	
12.		OFFICER	S AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFI	JERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		GER, HENRY R II E RUN ROAD #2 FL 33942	04	☐ DELETE	1	ame Treet	r address St-zip	Trollinger, Henry 1063 Hartley Ave Marco Island		B Change エ 34145	Addition
TITLE				DELETE	2.1 TI	_	11-211	MIN 00 -115MP		Change	Addition
ì					2.2 N						
NAME STREET ADDRESS					1		r address				
CITY-ST-ZIP					2.40	TY-	ST-ZIP				
TIFLE				DELETE	3.1 Ti	TLE				Change	Addition
NAME					3.2 N	AME					
STREET ADDRESS					3.3 \$	TREET	ADDRESS				
CITY - ST - ZIP					34.0	ity-	ST-ZIP		_		
THTLE	1			DELETE	4 1 T	TLE				Change	Addition
NAME					4.21	IAME					
STREEL ADDRESS	ļ				4.3 5	TREET	' ADDRESS				
CITY-ST-ZIP					4.4 0	łTY - 9	ST-ZIP				
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NAME	ļ				5.2 N	AME	Į				
STREET ADDRESS					5.3 S	TREET	F ADDRESS				
CI1Y-S1-21P							ST-ZIP				
TITLE				DELETE	6.1 T					Change	Addition
NAME					6.2 N	AME	1				
STREET ADDRESS							T ADDRESS				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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