

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000080374

1. Entity Name

WINTER PARK WOMEN'S HEALTH & FITNESS, INC.

FILED

Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90032 050 ***150.00

Principal Place of Business

Mailing Address

4076 N GOLDENROD RD
WINTER PARK FL 32792

280 S.R. 434
SUITE 1049
ALTAMONTE SPRINGS FL 32714
US

XXXXXXXX

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3280547

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PALLUCK, BERNARD
102 SWEETWATER CLUB BLVD
LONGWOOD FL 32779

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME PALLUCK, EDDIE M
STREET ADDRESS 102 SWEETWATER CLUB BLVD.
CITY-ST-ZIP LONGWOOD FL 32779

TITLE VP ☒ Change ☐ Addition
NAME EDDIE M. PALLUCK
STREET ADDRESS
CITY-ST-ZIP

TITLE EVP ☐ Delete
NAME PALLUCK, BERNARD F
STREET ADDRESS 102 SWEETWATER CLUB BLVD.
CITY-ST-ZIP LONGWOOD FL 32779

TITLE P ☒ Change ☐ Addition
NAME BERNARD F PALLUCK
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME PENSHAW, MARK
STREET ADDRESS 1801 WINTER GREEN BLVD.
CITY-ST-ZIP WINTER PARK FL

TITLE RENSRAW VP ☒ Change ☐ Addition
NAME MARK
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME JENKINS, WENDY
STREET ADDRESS 6118 GAMBLE DRIVE
CITY-ST-ZIP ORLANDO FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME HERRON, LISA
STREET ADDRESS 1162 A PASSED DELMAR #A
CITY-ST-ZIP CASSELBERRY FL

TITLE HEARRON ☒ Change ☐ Addition
NAME
STREET ADDRESS 1162-A PASSED DELMAR
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME RAHN, MARESSA
STREET ADDRESS 8203 CHESWORTH DRIVE
CITY-ST-ZIP ORLANDO FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 report or supplemental 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 appears in Block 11 or Block 12 if changed, or on an attachment with an address and all other like empowered.

SIGNATURE:

Bernard F. Palluck PRES 9 APRIL 2000 407 768-859
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)