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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000033623 (6)

WHITE SPRINGS SPAS, INC.

| Principal Place of Business | Mailing Address | | |
|--|--|--|--|
| 106 AIRPORT ROAD. SUITE A-600 LANT CITY FL 33567-1112 | 4408 AIRPORT ROAD, SUITE A-600 PLANT CITY FL 33567-1112 | | |
| | | | |

FILED Mar 16 1998 8:00am Secretary of State



| Principal Place | of Business | Mailing Address | | | a rearradi una casar merre amesi amesi marin merpa secam usina merca nama febr unds | |
|---|--------------------------------|----------------------|-------------|--|---|--|
| 4408 AIRPORT ROAD. SUITE A-600 4408 AIRPORT ROAD, SUITE A-600 | | |) | | | |
| PLANT CITY FL 33567-1112 PLANT CITY FL 33567-1112 | | | 12 | | DO NOT WRITE IN THIS SPACE | |
| | | | | | 3. Date Incorporated or Qualified | |
| | | | | | 05/01/1995 | |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | | | 4. FEI Number Applied For | |
| 21 | | 26 | | | 59-3315289 • Not Applicable | |
| I Suite, Apt. € | /, etc. | Suite, Apt. #, etc. | _ | | 5. Certificate of Status Desired S8.75 Additional | |
| 22 | | 27 | | | Fee Required | |
| 1 City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | |
| 23 28 | | · | ··· | Trust Fund Contribution | | |
| Zip | Country | <u> </u> | Zip Country | | 8. This corporation owes or has paid the current year Intangible | |
| 24 | 25 S. Name and Address of Curr | ant Registered Agent | 30 | | Personal Property Tax due June 30. X Yes No | |
| <u> </u> | | ent negistered Agent | | 81 Name | | |
| | DAN, MARK F | | | K | ENNETH W. SORAH | |
| Į. | B AIRPORT RD SUITE A-600 | | | 82 Street | Address (P.O. Box Number is Not Acceptable) | |
| PLA | NT CITY FL 33567 | | | B3 | AMC | |
| | | | | | | |
| | | | | 64 City | FL 85 33367- | |
| | | | | | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment of Societies of Section 607.0505, Florida Statutes. | | | | | | |
| SIGNATURE Strange of spatial continue of regishered agent and too of applicable (NOTE Registative Agent signature required when relinstating) DATE | | | | | | |
| 12. | | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | 70 | ☐ DELETE | 1.1 70 | LE | Change Addition | |
| NAME | JORDAN, MARK F | | 1.2 NA | ME | | |
| STREET ADDRESS | 4408 AIRPORT ROAD, SUIT | E A-600 | 1.3 \$T | reet adoress | | |
| CITY+ST-ZIP | PLANT CITY FL 33567-1112 | | 1.4 CI | Y-ST-ZIP | | |
| TITLE | | ☐ DELETE | 2.1 TIT | LE | D/VP/S ☐ Change ☑ Addition © | |
| NAME | | | 2.2 NA | ME | BAKER, WILLIE JOE | |
| STREET ADDRESS | | | 2.3 ST | REET ADDRESS | 4408 AIRPORT RP, SUITE A-400 | |
| CITY-ST-ZIP | | | | TY-ST-ZIP | PLANT CITY, FL 33567-1112 | |
| TITLE | | ☐ DELETE | 3.1 TIT | | P/+/O Change X Addition | |
| NAME | | | 3.2 NA | | SORAH, KENNETH W. | |
| STREET ADDRESS | | | 3.3 ST | REET ADDRESS | SAME AS ABOVE | |
| CITY - ST - ZIP | | | _ | TY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 4.1 TIT | | DIK, ONLY Change X Addition | |
| NAME | | | 4. 2 N | | SPONAGLE, KENNETH E. | |
| STREET ADDRESS | | | 1 | REET AODRESS | | |
| CITY - ST - ZIP | | | | Y-ST-ZIP | TAMPA, FL 33647 | |
| TITLE | | ☐ DELET E | 5.1]] | | Change Addition | |
| NAME | | | 5.2 NA | | | |
| STREET ADDRESS | | | 5.3 ST | REET ADDRESS | | |
| CITY-ST-ZIP | | | _ | Y-ST-ZIP | | |
| TITLE | | ☐ DELET E | 6.1 TIT | LE | ☐ Change ☐ Addition | |
| NAME | | | 6.2 NA | | | |
| STREET ADDRESS | | | 6.3 ST | REET ADDRESS | | |
| CITY-ST-ZIP | | | 6 A CII | Y-ST-ZIP | 1 | |

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

11.2120