FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 17, 2001 8:00 am P97000022791 DOCUMENT # **Secretary of State** 1. Entity Name 03-29-2001 90414 043 ***150.00 BODIES-N-MOTION FITNESS CENTER, INC. Principal Place of Business Mailing Address 101 EAST MAIN STREET 101 EAST MAIN STREET LEESBURG FL 34748 LEESBURG FL 34748 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3431741 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent. ** ---6. Name and Address of Current Registered Agent :: COOKSEY, BOWEN LARRY Street Address (P.O. Box Number is Not Acceptable) 101 EAST MAIN STREET LEESBURG FL: 34748 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Preside. PDTS ☐ Delete TITLE TITLE cooksey, COOKSEY, LAARY NAME 382#4 Journey Lan. 40831 GATOR LAKE RD STREET ADDRESS STREET ADDRESS 32159-4802 Lady Lake CITY-ST-ZIP LADY LAKE FL 32159 CITY-ST-ZIP VPD ☐ Delete TITLE Cooksex, Edie 38224 Sourney Lane TITLE COOKSEY, EDIE NAME STREET ADDRESS 40831 GATOR LAKE RD 1 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LADY LAKE FL 32159 ☐ Addition Change TITLE TITLE NAME PETERS, PATRICIA A. NAME STREET ADDRESS 7214 HARBOR VIEW DRIVE STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attach

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July 11, 2001

Division of Corporations Uniforms Business Report Filings P.O. box 1500 Tallahassee, FL 32302-1500

Dear Sirs:

Please find enclosed our annual report with the corrected changes that you requested. We mailed our original report on March 27, 2001 with our check for \$150.00, which has cleared the bank. If you may have any further questions please do not hesitate to contact us.

Sincerely,

Larry Cooksey President

Enclosure