

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

02 JUL -2 PM 2:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #**

1. Corporation Name

**The Bodyshop Gym, Inc.**

097000064590

2. Principal Office Address

14333 Beach Blvd. #35

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip

32250

Country

USA

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

7/25/1997

5. FEI Number

59-3459258

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

John H. Latshaw, Jr.

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

3010 S. Third Street

Suite, Apt. #, Etc.

City

Jacksonville Beach

State

FL

Zip Code

32250

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*John H. Latshaw, Jr.*

REGISTERED AGENT MUST SIGN

Date June 10, 2002

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Jeffrey M. Preuss	8136 Vista Forest Drive	Roanoke, VA 24018-5708
D	Mark D. Tripp	1445 Longview Road	Roanoke, VA 24018

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey M. Preuss

6/14/02

Date

Daytime Phone #

(540)  
774-6821

CR2E061 (9/01)

7/3/02

*Jeffrey M. Preuss  
The Bodyshop Gym, Inc.  
14333 Beach Boulevard, #33  
Jacksonville, FL 32250*

June 11, 2002

Secretary of State  
State of Florida  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: THE BODYSHOP GYM, INC. – Application for Corporate Reinstatement**


Dear Secretary:

Enclosed is the Corporation Reinstatement form for reinstating The Bodyshop Gym, Inc., together with a check in the amount of \$915.00 for reinstatement fees.

I am unaware of having received a prior notice from your office for the annual fee and the former President/Secretary of The Bodyshop Gym, Inc. who was at the physical address of the corporation at the time the notice would have been mailed is no longer with the corporation.

Thank you for your assistance and cooperation. I trust the enclosed form and check are sufficient to reinstate The Bodyshop Gym, Inc. as a Florida corporation in good standing.

Very truly yours,

  
Jeffrey M. Preuss  
Director

/md  
Enclosures