## 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 # **P97000092485** (6)

## **VENTURE FITNESS CORPORATION**

Principal Place of Business

Mailing Address

## FILED Feb 03 1998 8:00am Secretary of State



1326 S. 6TH ST. JACKSONVILLE BEACH FL 32250		1326 S. 6TH ST. JACKSONVILLE BEACH FI	L 32250	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				10/27/1997	
_	lace of Business	2a. Mailing Address		4. FEI Number Appl	ed For
21	Suite 6	26			Applicable
Suite, Apt. #, etc.  22 11497 Columbia Bork Dr. W 27  City & State City & State			· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired Fee Requ	
23 Jacksonville 28				6. Election Campaign Financing \$5.00 M Trust Fund Contribution Added to	
			Country  8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent  DOCC DDICE 4 81 Name //				10. Name and Address of New Registered Agent	
	OSS, BRUCE J			unter & Hssaintes, CPAS, PH	İ
	26 <b>S</b> . 6TH ST. CK <b>SO</b> NVILLE BEACH FL 32250		82 Street Address (P.O. Box Number is Alot Acceptable)		
JA	ONSONVILLE DEMON PL 32230		83 (1)		
			72	09 Baymeadows Kd. Svite 1	
			84 City J	acksonville FL 85 Zig Co.	<b>プ</b> ク
11. Pursuant i	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the above-named co	repration submits this statement for the purpose of changing its re	egistered
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 obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Bruce Koss		DU	uce Mass 1.19.98	
12.	Signature, typed or printed name of registered age OFFICERS ANI		Registered Apont argneture request.	uired whom feinstaining DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12
TITLE	D	DELETE	1.1 TITLE		Addition
NAME	WILLIAMSON, TIM R		1.2 NAME		
STREET ADDRESS	1326 S. 6TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE BEACH FL 3		1.4 CITY - ST - ZIP		Į;
TITLE		☐ DELETE	2.1 TITLE	Change [	Addition
NAME			2.2 NAME		I
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		T on the	2. 4 CITY-ST-7IP		
TITLE		☐ DELETE	3.1 TITLE	L_f Change [	Addition
NAME			3.2 NAME		
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE	Change [	Addition
NAME		010010	4. 2 NAME	Cilange L	_ AUGILION
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE	Change	Addition
NAME :			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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.

Slock 12 of block 15 if changed, of of all attachment with all addr