

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000093460

FILED
Apr 09, 2002 8:00 AM
Secretary of State

Entity Name: WILSON'S ATHLETIC CLUBS, INC.

Current Principal Place of Business:

11252 W HILLSBOROUGH AVE
TAMPA, FL 33635 US

New Principal Place of Business:

Current Mailing Address:

475 CENTRAL AVENUE
SUITE M-8
ST. PETERSBURG, FL 33701 US

New Mailing Address:

C/O ERNEST L. MASCARA, PA
475 CENTRAL AVENUE, SUITE M-8
ST. PETERSBURG, FL 33701 US

FEI Number: 59-3478205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASCARA, ERNEST L
KRESS BUILDING, SUITE M-8
475 CENTRAL AVENUE
SAINT PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON, RAY
Address: 7172 ESTRELLA DE MAR ROAD
City-St-Zip: CARLSBAD, CA 92009 US

Title: S () Delete
Name: EDD, PAM
Address: 1330 BLUE HERON AVENUE
City-St-Zip: ENCINITAS, CA 92024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, RAY
Address: 2645 OBELISCO PLACE
City-St-Zip: CARLSBAD, CA 92009 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAM EDD

S

04/09/2002

Electronic Signature of Signing Officer or Director

Date