

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000093460

FILED  
Mar 17, 2004  
Secretary of State

Entity Name: WILSON'S ATHLETIC CLUBS, INC.

## Current Principal Place of Business:

2645 OBELISCO PLACE  
CARLSBAD, CA 92009 US

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILSON, RAY  
Address: 2645 OBELISCO PLACE  
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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

03/17/2004

Electronic Signature of Signing Officer or Director

Date