

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048866

FILED
Apr 29, 2006
Secretary of State

Entity Name: FITNESS SOLUTIONS OF THE PALM BEACHES, INC.

Current Principal Place of Business:

344 S COUNTY CLUB DR
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

344 S COUNTY CLUB DR
LANTANA, FL 33462

New Mailing Address:

FEI Number: 65-0843752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZGERALD-LANGOLF, KAREN
344 SOUTH CENTRAL CLUB DRIVE
ATLANTIS, FL 33468 US

Name and Address of New Registered Agent:

FITZGERALD-LANGOLF, KAREN
344 SOUTH COUNTRY CLUB DRIVE
ATLANTIS, FL 33462 US

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: KAREN FITZGERALD-LANGOLF

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FITZGERALD-LANGOLF, KAREN
Address: 344 SOUTH CENTRAL CLUB DRIVE
City-St-Zip: ATLANTIS, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FITZGERALD-LANGOLF, KAREN
Address: 344 SOUTH COUNTRY CLUB DRIVE
City-St-Zip: ATLANTIS, FL 33462 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KAREN FITZGERALD-LANGOLF

D

04/29/2006

Electronic Signature of Signing Officer or Director

Date