

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 30, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P98000079649**

1. Entity Name

**RGW SPORTS AND FITNESS, INC.**



Principal Place of Business

**3183 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308**

Mailing Address

**3183 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308 US**



08142007

No Chg-P

CR2E034 (11/05)

4. FEI Number

**59-3534440**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

**WESSON, ROBIN G  
3183 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**8/27/07**

**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
WESSON, ROBIN G  
3183 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308**

TITLE  
NAME  
STREET ADDRESS  
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08/30/07-80004-008 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Robin G. Wesson**

Date

**8/27/07**

Daytime Phone #

**9505230801**