2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P98000081346 May 09, 2000 8:00 am 1. Entity Name THE DOWNTOWN FITNESS CLUB, INC. **Secretary of State** 05-09-2000 90027 028 ***158.75 Mailing Address Principal Place of Business 315 SOUTH HOPKINS AVENUE P.O. BOX 2045 **TITUSVILLE FL 32781-2045** TITUSVILLE FL 32796 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-3535375 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HENNIS-MYERS, PAMELA J Street Address (P.O. Box Number is Not Acceptable) 2885 FAWN LAKE BLVD MIMS FL 32754 Zip Code City 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 THE STATE OF SECTION AND SECTION AND ADDRESS OF SECTION ADDRES LANCE S Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change ☐ Delete TITI F TITLE DAVIS, HUBERTA M NAME P.O. BOX 2045 STREET ADDRESS STREET ADDRESS CLTY-ST-ZIP TITUSVILLE FL 32781 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE DAVIS, WILLIAM J NAME NAME P.O. BOX 2045 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITUSVILLE FL 32781 ☐ Change ☐ Addition ☐ Delete TITLE TITLE MYERS, JAMES W NAME NAME STREET ADDRESS 2885 FAWN LAKE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIMS FL 32754 Change Addition ☐ Delete TITLE HENNIS-MYERS, PAMELA J NAME NAME STREET ADDRESS STREET ADDRESS 2885 FAWN LAKE BLVD CITY-ST-ZIP CITY-ST-ZIP MIMS FL 32754 ☐ Change Addition TITLE ☐ Delete TITI E DAVIS, WILLIAM G NAME NAME 2845 FAWN LAKE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIMS FL 32754 ☐ Change ☐ Addition ☐ Delete TITLE TITLE DAVIS, MARY AYNN NAME STREET ADDRESS 2845 FAWN LAKE BLVD STREET ADDRESS CITY-ST-ZIP MIMS FL 32754 CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: