FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90151 006 ***150.00

DOCUMENT # P99000000900

1. Entity Name
Pine Hills Athletic Club, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1100 North Pine Hills
Suite, Apt. #, etc.
City & State: Orlando Florida
Zip: 32808 Country: USA

3. Mailing Address
1113 North Pine Hills Rd
Suite, Apt. #, etc.
City & State: Orlando Florida
Zip: 32808 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3549344 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: Bowerbank Income Tax & Accounting Service, Inc
Street Address (P.O. Box Number is Not Acceptable): 1113 North Pine Hills Road
City: Orlando FL Zip Code: 32808

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	Ashley-Jones, Barbara
STREET ADDRESS	1113 North Pine Hills Rd
CITY-ST-ZIP	Orlando Florida 32808-7125
TITLE	VPD
NAME	Powe, Lesline
STREET ADDRESS	1113 North Pine Hills Rd
CITY-ST-ZIP	Orlando Florida 32808-7125

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4/25/02 407-533-0580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State, Division of Corporations

Corporations Online

www.sunbiz.org

Public Inquiry

Florida Profit

Attachment P99000000900

6054495

PINE HILLS ATHLETIC CLUB, INC.

PRINCIPAL ADDRESS
1100 NORTH PINE HILLS ROAD
ORLANDO FL 32808-7125

MAILING ADDRESS
1100 NORTH PINE HILLS ROAD
ORLANDO FL 32808-7125

Document Number	FEI Number	Date Filed
P99000000900	593549344	01/04/1999
State	**Status**	**Effective Date**
FL	ACTIVE	NONE

Registered Agent

Name & Address
BOWERBANK INCOME TAX & ACCOUNTING SERVICE 1113 NORTH PINE HILLS ROAD ORLANDO FL 32808-7125

Officer/Director Detail

Name & Address	Title
ASHLEY-JONES, BARBARA 1113 NORTH PINE HILLS ROAD ORLANDO FL 32808-7125	PTD
POWE, LESLINE 1113 NORTH PINE HILLS ROAD ORLANDO FL 32808-7125	VPD

Annual Reports

Report Year	Filed Date	Intangible Tax