

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000021313

Entity Name: KOKOPELLI'S GYM, INC.

FILED  
Apr 12, 2006  
Secretary of State

## Current Principal Place of Business:

4011 S HWY 17-92  
CASSELBERRY, FL 32707 US

## Current Mailing Address:

4011 S. HWY 17-92  
CASSELBERRY, FL 32707

## New Principal Place of Business:

1285 SEMINOLA BLVD  
#117-200  
CASSELBERRY, FL 32707 US

## New Mailing Address:

1285 SEMINOLA BLVD  
#117-200  
CASSELBERRY, FL 32707

FEI Number: 59-3561062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POLLOCK, ADAM  
4011 S HWY 17-92  
CASELBERRY, FL 32707 US

## Name and Address of New Registered Agent:

POLLOCK, ADAM  
1285 SEMINOLA BLVD  
#117-200  
CASELBERRY, FL 32707 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: ADAM POLLOCK

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: POLLOCK, ADAM  
Address: 4011 S HWY 17-42  
City-St-Zip: CASSELBERRY, FL 32707

Title: V ( ) Delete  
Name: POLLOCK, LARRY  
Address: 4011 S HWY 17-92  
City-St-Zip: CASSELBERRY, FL 32707

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: POLLOCK, ADAM  
Address: 1285 SEMINOLA BLVD #117-200  
City-St-Zip: CASSELBERRY, FL 32707

Title: V (X) Change ( ) Addition  
Name: POLLOCK, LARRY  
Address: 1285 SEMINOLA BLVD #117-200  
City-St-Zip: CASSELBERRY, FL 32707

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: ADAM POLLOCK

P

04/12/2006

Electronic Signature of Signing Officer or Director

Date