

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000022009

FILED
Jul 12, 2006
Secretary of State

Entity Name: FITNESS PRODUCTIONS, INC.

Current Principal Place of Business:

2200 E SEMORAN BLVD
APOPKA, FL 32703

New Principal Place of Business:

2234 E SEMORAN BLVD
APOPKA, FL 32703

Current Mailing Address:

2200 E SEMORAN BLVD
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3555060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVES, MICHAEL S
2200 E. SEMORAN BLVD
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

REEVES, MICHAEL S
2234 E. SEMORAN BLVD
APOPKA, FL 32703 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: MICHAEL S. REEVES

07/12/2006

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REEVES, MICHAEL S
Address: 270 SUTHERLAND COURT
City-St-Zip: APOPKA, FL 32712

Title: DSVP (X) Delete
Name: STRIBLING, RONALD
Address: 184 NEWGATE LOOP
City-St-Zip: HEATHROW, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REEVES, MICHAEL S
Address: 557 SABLE LAKE DRIVE #213
City-St-Zip: LONGWOOD, FL 32779

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL S. REEVES

PD

07/12/2006

Electronic Signature of Signing Officer or Director

Date