

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

04-13-2000 90029 004 \*\*\*150.00

DOCUMENT # P99000041880

1. Entity Name

ALL WOMEN'S FITNESS CLUB OF OCOEE, INC.

Principal Place of Business

Mailing Address

280 STATE ROAD 434 STE. 1049  
ALTAMONTE SPRINGS FL 32714280 STATE ROAD 434 STE. 1049  
ALTAMONTE SPRINGS FL 32714-3859

2. Principal Place of Business

3. Mailing Address

ALL WOMEN'S FITNESS CLUB OF OCOEE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10908 W. Colonial Dr.

City &amp; State

City &amp; State

OCOEE, FL 34761

Zip

Country

Zip

Country

4. FEI Number

59-3575948

Applied For:

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PALLUCK, BERNARD  
280 STATE ROAD 434 STE. 1049  
ALTAMONTE SPRINGS FL 32714

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>VPRES.</del> PALLUCK, BERNARD 102 SWEETWATER CLUB BLVD. LONGWOOD FL 32779	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARK RENSLOW VPRES. 187 Long Branch Rd. WINTER PARK FL 32792	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT MATTHEW MC GROW 308 WESCLIFF DR. OCOEE, FL 34761	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. BERNARD P PALLUCK 102 SWEETWATER CLUB BLVD LONGWOOD FLA 32779	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT PHILLIP KOSTELYK 626 STANHOPE DR. CASSELBERRY FL 32707	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT LISA HEARN 1102-A PASEO DEL MAR CASSELBERRY, FL 32707	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT MAURESSA PAHN 8203 CHELSWORTH DR. ORLANDO FL 32835	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JILL WENDY JENLINS 6118 GAMBLE DR. ORLANDO FL 32808	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this report 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 authorized 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, name, or other information empowered.

SIGNATURE:

*BERNARD P PALLUCK* 9 APRIL 2000 407 788-8854  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)