2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000075524

Apr 23, 2004 Secretary of State

Entity Name: FLORIDA'S BODY COMPANY, INC. **Current Principal Place of Business: New Principal Place of Business:** 5310 BROADWAY AVE., P.O. BOX 6954 JACKSONVILLE, FL 32254 **Current Mailing Address: New Mailing Address:** 5310 BROADWAY AVE., P.O. BOX 6954 JACKSONVILLE, FL 32254 FEI Number: 59-3653205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LANDAU, FRANCINE CLAIR ESQ. 1501 SAN MARCO BLVD. JACKSONVILLE, FL 32207 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MURRAY, JOHN L MURRAY, JOHN L Name: Name: 1456 LONGVIEW DR., SOUTH 14546 LONGVIEW DR., SOUTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32223 Title: Title: () Delete () Change () Addition Name: TRIPPE, SANDRA L Name: 1270 CUNNINGHAM CREEK DRIVE Address: Address: JACKSONVILLE, FL 32259 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition MURRAY, BLAKE A Name: Name: 10626 GENERAL AVENUE Address: Address: City-St-Zip: JACKSONVILLE, FL 32220 City-St-Zip: Title: () Delete Title: () Change () Addition LAVIERI, JIM Name: Name: Address: 6782 118TH AVENUE NORTH Address: City-St-Zip: LARGO, FL 34643 City-St-Zip: Title: Title: () Delete () Change () Addition COVELESKE, STAN Name: Name: 6782 118TH AVENUE NORTH Address: Address: City-St-Zip: LARGO, FL 34643 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN L. MURRAY **PRES** 04/23/2004