2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095064

Entity Name: FIRST IN FITNESS, INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9802-005 BAYMEADOWS ROAD JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

9802-005 BAYMEADOWS ROAD JACKSONVILLE, FL 32256

FEI Number: 62-1799393 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:

CONNORS, JEFFREYS
8787 SOUTHSIDE BLVD
APT 5709
JACKSONVILLE, FL 32256 US

CONNORS, JEFFREY
3524 HERON DRIVE SOUTH
JACKSONVILLE BEACH, FL 32250 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: JEFFREY CONNORS 04/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 DODICH, HARRY
 Name:

 Address:
 2370 HILLCREST RD STE 3
 Address:

 City-St-Zip:
 MOBILE, AL 36695
 City-St-Zip:

Title: PD () Delete Title: () Change () Addition

 Name:
 CROWLEY, GLENN
 Name:

 Address:
 2370 HILLCREST RD
 Address:

 City-St-Zip:
 MOBILE, AL 36695
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 CONNORS, JEFFREY
 Name:
 CONNORS, JEFFREY

 Address:
 8787 SOUTHSIDE BLVD, 5709
 Address:
 3524 HERON DRIVE SOUTH

 City-St-Zip:
 JACKSONVILLE, FL 32256
 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250

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: GLENN CROWLEY PD 04/14/2005