

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90002 034 \*\*\*150.00

**00067870**

DO NOT WRITE IN THIS SPACE

**DOCUMENT #** P99000095083**1. Entity Name**

Fit &amp; Fun, Inc.

**Principal Place of Business**1113 EStero Blvd.  
Unit 5  
Fort Myers Beach, FL  
33931**Mailing Address**1113 Estero Blvd.  
Unit 5  
Fort Myers Beach, FL  
33931**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

**4. FEI Number**

65-0996989

Applied For

Not Applicable

Zip

Country

Zip

Country

**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**Schutt, Darrin R.  
1105 Cape Coral Pkwy East, Suite C  
Cape Coral, FL 33904

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**

| 11. OFFICERS AND DIRECTORS      |                                                                                  | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11             |      |
|---------------------------------|----------------------------------------------------------------------------------|-------------------------------------------------------------------|------|
| TITLE                           | NAME                                                                             | TITLE                                                             | NAME |
| <input type="checkbox"/> Delete | D<br>Wuerzer, Brigitte<br>1113 Estero Blvd. Unit 5<br>Fort Myers Beach, FL 33931 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input type="checkbox"/> Delete |                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input type="checkbox"/> Delete |                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
| <input type="checkbox"/> Delete |                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |
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| <input type="checkbox"/> Delete |                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |      |

**13. I hereby certify that the information supplied with this filing 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 empowered 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, with all other like empowered.****SIGNATURE:**

X B Duro

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/12/00 (941) 7650646

Date

Daytime Phone