

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100697

FILED  
Aug 14, 2008  
Secretary of State

Entity Name: SINGER ISLAND HEALTH AND FITNESS, INC.

## Current Principal Place of Business:

#1289 EAST BLUE HERON BLVD.  
RIVIERA BEACH, FL 33404

## New Principal Place of Business:

#57 EAST BLUE HERON BLVD.  
RIVIERA BEACH, FL 33404

## Current Mailing Address:

1289 EAST BLUE HERON BLVD.  
RIVIERA BEACH, FL 33404

## New Mailing Address:

#57 EAST BLUE HERON BLVD.  
RIVIERA BEACH, FL 33404

FEI Number: 65-0981850

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAFFAELE, LOUIS JOSEPH .  
4142 COTTONWOOD AVE.  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

RAFFAELE, LOUIS JOSEPH .  
57 EAST BLUE HERON BLVD.  
RIVIERA BEACH, FL 33404 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: LOUIS RAFFAELE

08/14/2008

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: PDT ( ) Delete  
Name: RAFFAELE, LOUIS J  
Address: 4142 COTTONWOOD AVE.  
City-St-Zip: PALM BEACH GARDENS, FL 33410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change ( ) Addition  
Name: RAFFAELE, LOUIS J  
Address: 57 EAST BLUE HERON BLVD..  
City-St-Zip: RIVIERA BEACH, FL 33404

I hereby certify that the information supplied with this filing does not qualify 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: LOUIS J RAFFAELE

PDT

08/14/2008

Electronic Signature of Signing Officer or Director

Date