## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # \$77855

(2)

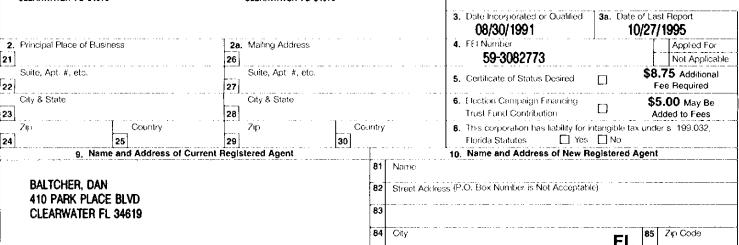
Corporation Name

SPA MANAGEMENT, INC.

Mailing Address

Principa' Place of Business
410 PARK PLACE BLVD
CLEARWATER FL 34619

410 PARK PLACE BLVD CLEARWATER FL 34619



11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

12.	OFFICERS AND DIRE	ECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
III.E	PT	DELETE	f 1 101£	Change [	Addition
NAME.	BALTCHER, DAN		1.2 NAME		
STREET ADDRESS	410 PARK PLACE BLVD.		13 STREET ADDRESS		
CHTY - ST - ZIP	CLEARWATER FL 34619		14 0/TY - S1 - 7/P		
TITLE		[_] DELFTE	2 1 1ift.f	Change C	Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			24 CITY - ST - 7IP		
title		□ DELETE	3 1 TITLE	Change [	] Addition
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STREET ADDRESS			3.3 STREET ADDRESS		
City - St - ZiP			3.4 CITY+ST ZIP		
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TITLE		DELETE	5 1 TITLE	Change [	Add-tion
NAMÉ			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
DITY-ST-ZIE			5.4 CHY-St-ZiP		
TILE		□ DELFTE	6 1111.8	☐ Change ☐	Addition
NAME:			6.2 NAMí		
STREET ADDRESS			6.3 STREET ADDRESS		
CHY+S1-ZIP			6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 it changed, or or in attaching juvith an address.

SIGNATURE:

GRATURE AND TYPED OF PRINCES NAME OF SIGNING OFFICER OR DIRECTOR

30/96 8135