2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2004
Secretary of State

DOCUMENT# V26373

Entity Name: WORLD GYM OF OVIEDO, INC.

Current Principal Place of Business:

BAY NO. B
ALAFAYA SQUARE SHOPPING CENTER
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

C/O RALPH SMITH
P O BOX 410485
MELBOURNE, FL 32941 US

New Mailing Address:

FEI Number: 59-3121396 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, RALPH W.
BAY NO B #19 ALATAYA WOODS BLVD
ALAFAYA SQUARE SHOPPING CENTER
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

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:

Title: DPS ( ) Delete
Name: SMITH, RALPH W.,
Address: 8115 S. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL

Title: VP ( ) Delete
Name: SMITH, CODY J
Address: 2598 EKANA DRIVE
City-St-Zip: OXIEDA, FL

Title: D (X) Delete
Name: SMITH, HALLE
Address: 8115S TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: SMITH, CODY J
Address: 1680 HWY A1A SUITE 5
City-St-Zip: SATELLITE BEACH, FL 32937

Title: ( ) Change ( ) Addition
Name:
Address:
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: RALPH W. SMITH DPS 02/06/2004

Electronic Signature of Signing Officer or Director Date