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 #
1. Corporation Name

V63605

(2)

THE SUPER SLOW EXERCISE GUILD, INC.

Principal Place of Business	Mailing Address	
612 KENWICK CIR.	612 KENWICK CIR. STE 205	

Principal Place o	of Business	Mailing Address						
612 KENWIC STE. 205	CK CIR.	612 KENWICK CIR. STE. 205						
CASSELBERRY FL 32707		CASSELBERRY FL 32707		3. Date Incorporated or Qualified				
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number	i		Applied For
21		26		59-3144533			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	, D	•	5 Additional	
22		27			S. Certinoate of Clatos Bosico	· U	Feo	Required
City & State		City & State		6. Election Campaign Financin	ng 🗖		OO May Be	
23		28		Trust Fund Contribution Adced to Fees 8. This corporation has liability for intangible tax under s 199.032,				
	Country	Zip	Cou	ntry		rfor intangible ta Yes 🗹 No	x under s	s 199.032,
24	25 25 Name and Address of Current	Pagistared Agent	30		10. Name and Address of N		Agent	
	9. Hallis and Address of Current	Healsteren waern		81 Name	10, 11, 11	1 1	-	
HAVES	, ROSEMARY H.			I K	enneth M H	utchw	15	
	TH ORANGE AVENUE				ress (P.O. Box Number is Not Acce	# 205		
	I ORANGE PLAZA			83	kenwick UK	HAU)		
	IDO FL 32802							
UNLAN	DO FL 32002			B4 CIN (1 h	hellower	FL	85	Ip Code
	o the provisions of Sections 607.0502	- 4 007 1500 Florido State	too the ebo	us possed some	ration or houte this settlement for th		noioa its	registered office
or registere	ed agent, or both, in the State of Florida	a. Such change was author	ized by the c	orporation's boa	rd of directors. I hereby accept the	appointment as	registere	ed agent. I am
familiar with	h, and accept the obligations of Section	in 607.0505, Florida Statute	ss.	1 1				
SIGNATURE X	Kennette In Kulkur	Kenne		1. Hutc	nus	4/25	196	
3	Signature: Typed or printed hame of registered agent a OFFICERS AND		ICIE Hegistered	Agent signature require	ADDITIONS/CHANGES TO	OFFICERS AND	DIBECT	OB\$ IN 12
12.	PVP	DELETE	1.17	T) F	ABBITIONS/OFFINISES TO		Change	
117LE	HUTCHINS, KEN	LJ occess	1.2 N					
NAME	612 KEMWICK CIR. #205			REET ADDRESS				
STREET ADDRESS	CASSELBERRY FL 32707			1				
CITY-ST-ZIP	ST ST	☐ DELETE	2 1 7	TY-ST-ZIP			Change	Addition
TIFLE	HUTCHINS, BRENDA S		22 N			•		,
NAME	612 KENWICK CIRC. #205							
STREET ADDRESS	CASSELBERRY FL 32707			REET ADDRESS				
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TITLE			1			•		
NAME			3.2 N	l.				
STHEET ACORESS				TREET ADDRESS				
CITY-ST-ZIP		["] DELETE	3.4 C	TY-ST-ZIP			Change	Addition
TITLE			- 1			,		
NAME			4.2 N					
STREEL ADDRESS				TREET ADDRESS				
CITY-S1-ZIP		□ DELETE	5 1 ĭ	TY-ST-ZIP		-	Change	Addition
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NAME			52 N					
STREET ADDRESS				TREET ADDRESS				
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TITLE		DELETE	6 1 7			ŀ	Change	e Addition
NAME			6 2 N	1				
STREET ADDRESS			6.3 S	TREET ADDRESS				
CITY-ST-ZIP			6.4 C	ITY-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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

Kenneth M. Hutchins 4/25/96 407-260-6204