

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 28, 2011  
Secretary of State**

DOCUMENT# L09000020432

Entity Name: FITNESS FOR MOMS, LLC

**Current Principal Place of Business:**

5001 CHOCTAW AVENUE  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

5001 CHOCTAW AVENUE  
PENSACOLA, FL 32507

**New Mailing Address:**

FEI Number: 26-4358375

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LACOUR, KRISTY M  
5001 CHOCTAW AVENUE  
PENSACOLA, FL 32507 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LACOUR, KRISTY M  
Address: 5001 CHOCTAW AVENUE  
City-St-Zip: PENSACOLA, FL 32507

Title: MGRM  
Name: LACOUR, BRADLEY C  
Address: 5001 CHOCTAW AVENUE  
City-St-Zip: PENSACOLA, FL 32507

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KRISTY M. LACOUR

MGRM

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date