## I hereby 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 all other like empowered. 01/30/2023

Ρ

#### SIGNATURE: BRENDA G OTTO

Electronic Signature of Signing Officer/Director Detail

DOEHNE, LON S 14333 BONEY ROAD JACKSONVILLE, FL 32226 US
The above named entity submits this statement for the purpose of changing its registered office or registered
SIGNATURE:

# 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000028611

### Entity Name: ATHLETE'S CHOICE FITNESS CENTER, INC.

**Current Principal Place of Business:** 

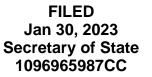
12425 N MAIN ST JACKSONVILLE, FL 32218

#### **Current Mailing Address:**

11353 EMUNESS RD. JACKSONVILLE, FL 32218

### FEI Number: 59-3306138

### Name and Address of Current Registered Agent:



Date

Date

Certificate of Status Desired: No

d agent, or both, in the State of Florida.

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	S	Title	Т
Name	MUSIC, ALFREDINE	Name	BEVILL, TIFANY EVAN
Address	1228 GLEN DRIVE	Address	15353 YELLOW BLUFF ROAD
City-State-Zip:	JACKSONVILLE FL 32218	City-State-Zip:	JACKSONVILLE FL 32226
Title	MD	Title	Р
Name	HARMAN, KIRSTEN	Name	OTTO, BRENDA G
Address	14238 BONEY ROAD	Address	1043 KRAFT ROAD
City-State-Zip:	JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32218
Title	D		
Name	OTTO, SCOTT W		
Address	1043 KRAFT ROAD		
City-State-Zip:	JACKSONVILLE FL 32218		