

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000107228

**Entity Name:** MCH FITNESS SYSTEMS LLC

**Current Principal Place of Business:**

4081 L B MCLEOD ROAD  
A  
ORLANDO, FL 32811

**FILED**  
**Mar 22, 2013**  
**Secretary of State**  
**CC2118640715**

**Current Mailing Address:**

2145 RIDGE DR.  
WINTER PARK, FL 32792 US

**FEI Number:** 45-3326189

**Certificate of Status Desired:** No

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

HOYT, MAXWELL C  
4081 L B MCLEOD ROAD  
A  
ORLANDO, FL 32811 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name HOYT, MAXWELL C  
Address 2145 RIDGE DR.  
City-State-Zip: WINTER PARK FL 32792

*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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAXWELL HOYT

**OWNER**

**03/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date