

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000045049

**Entity Name:** #1 SPA, LLC

**Current Principal Place of Business:**

6205 E HILLSBOROUGH AVE  
TAMPA, FL 33610

**Current Mailing Address:**

6205 E HILLSBOROUGH AVE  
TAMPA, FL 33610

**FEI Number:** 45-4950831

**Certificate of Status Desired:** No

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

KISER, JOHN M  
3000 COTTAGE GROVE CT  
ORLANDO, FL 32822 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:** JOHN M KISER

03/18/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name KISER, JOHN M  
Address 3000 COTTAGE GROVE CT  
City-State-Zip: ORLANDO FL 32822

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

**SIGNATURE:** JOHN KISER

MEMBER

03/18/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date