## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000092411

Entity Name: PILATES CENTER OF ORMOND BEACH, LLC

**Current Principal Place of Business:** 

823 N US HWY 1, UNIT 3 ORMOND BEACH, FL 32174

## **Current Mailing Address:**

823 N US HWY 1, UNIT 3 ORMOND BEACH, FL 32174

FEI Number: 46-0803443 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTRO, MARTHA 3968 S. CHINOOK LANE ORMOND BEACH, FL 32174 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: MARTHA CASTRO 07/13/2016

Electronic Signature of Registered Agent

Date

FILED Jul 13, 2016

**Secretary of State** 

CC8352753917

## Authorized Person(s) Detail:

Title MGR

Name CASTRO, MARTHA Address 3968 S. CHINOOK LN

City-State-Zip: ORMOND BEACH FL 32174

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: MARTHA CASTRO PRESIDENT 07/13/2016