

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000036485

**Entity Name:** PEAK PERFORMANCE SPORTS THERAPY L.L.C.

**Current Principal Place of Business:**

2950 1ST AVE NORTH  
ST PETERSBURG, FL 33713

**Current Mailing Address:**

2950 1ST AVE NORTH  
ST PETERSBURG, FL 33713 US

**FEI Number:** 46-2245162

**Certificate of Status Desired:** No

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

MAGGIO, MATTHEW C  
450 TREASURE ISLAND CSWY, UNIT 512  
TREASURE ISLAND, FL 33706 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 MAGGIO, MATTHEW C  
Address 2950 1ST AVE NORTH  
City-State-Zip: ST PETERSBURG FL 33713

*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:** MATTHEW C MAGGIO

**OWNER**

**03/31/2018**

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

\_\_\_\_\_  
Date