

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000124529

Entity Name: AMPED FITNESS ALTAMONTE LLC

Current Principal Place of Business:

130 EAST ALTAMONTE DRIVE
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

PO BOX 2179
SAINT PETERSBURG, FL 33731 US

FEI Number: 86-2860111

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APPLETON REISS C/O KEITH SKOREWICZ
215 N HOWARD AVE
SUITE 200
TAMPA, FL 33606 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	AP	Title	MGR
Name	THOMAS, STEPHEN	Name	AMPED FITNESS LLC
Address	PO BOX 2179	Address	PO BOX 2179
City-State-Zip:	SAINT PETERSBURG FL 33731	City-State-Zip:	SAINT PETERSBURG FL 33731

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: STEPHEN THOMAS

CFO

02/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date