

**2023 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:**

830 3RD AVE S  
SAINT PETERSBURG, FL 33701 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 MGR  
Name THOMAS, STEPHEN  
Address 830 3RD AVE S  
City-State-Zip: SAINT PETERSBURG FL 33701

*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

01/24/2023

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

\_\_\_\_\_ Date