

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000389190

**Entity Name:** INNOVATION GYM, LLC

**Current Principal Place of Business:**

1720 CLAYTON RD.  
CHIPLEY, FL 32428

**Current Mailing Address:**

1720 CLAYTON RD.  
CHIPLEY, FL 32428

**FEI Number:** 87-3375393

**Certificate of Status Desired:** Yes

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

KENT, APRIL  
3348 MYSTERY SPRINGS RD.  
MARIANNA, FL 32448 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            AMBR  
Name            KENT, APRIL  
Address        3348 MYSTERY SPRINGS RD.  
City-State-Zip: MARIANNA FL 32448

*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:** APRIL KENT

**OWNER**

**03/11/2022**

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

\_\_\_\_\_  
Date