

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002083

FILED
May 01, 2007
Secretary of State

Entity Name: FITNESS BY DESIGN PHYSICAL THERAPY AND PERSONAL TRAINING SERVICES, LLC

Current Principal Place of Business:

P.O. BOX 2735
PALM BEACH, FL 33480

New Principal Place of Business:

4000 BRUSH CREEK ROAD
SNOWMASS VILLAGE, CO 81615

Current Mailing Address:

P.O. BOX 2735
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-1075805 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WARNER & ASSOC. CPA, PA
1897 PALM BEACH LAKES #226
WEST PALM BEACH, FL 33409 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOLMAN, PETER
Address: P.O. BOX 2735
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: PETER HOLMAN

MGRM

05/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date