2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 25, 2005 8:00 am Secretary of State **DOCUMENT # L01000010780** 04-25-2005 90103 040 ****50.00 1. Entity Name CLUB PERFORMAX, L.L.C. Principal Place of Business Mailing Address 1208 SARNO RD. 1208 SARNO RD. MELBOURNE, FL 32935 MELBOURNE, FL 32935 03232005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FÉI Number 65-1133292 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUNT, DELORES DO NOT WRITE 2560 KINGSMILL AVE MELBOURNE, FL 32934 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS Ρ TITLE STEWART, RODNEY B 2001 Siroco Lane 20T-TERRAHOP-ITE STREET ADDRESS 32934 CITY-ST-ZIP MELBOURNE, FL 320000753 VP TITLE 2001 Siroco Lane STEWART, RISA J NAME STREET ADDRESS TERRANCE ALS 32934 MELBOURNE, FL 300050750 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it 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:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED