

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000034605

**FILED**  
**Feb 22, 2010**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA HEALTH CLUBS, LLC

**Current Principal Place of Business:**

7733 TURKEY LAKE RD  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

2841 HARTLAND RD  
STE 200  
FALLS CHURCH, VA 22043

**New Mailing Address:**

**FEI Number:** 11-3674512      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RISMILLER, MATT  
700 BALMORAL RD  
WINTER PARK, FL 32789      US

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

RISMILLER, MATT  
310 SHADOWBAY BLVD N  
LONGWOOD, FL 32779      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

02/22/2010

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEWIS, PLEASANT  
Address: 2732 LAKE HOWELL LN.  
City-St-Zip: WINTER PARK, FL 32792

I hereby 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: PLEASANT A LEWIS

MGRM

02/22/2010

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