2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000035071

Entity Name: CPD FITNESS, LLC

FILED Jan 22, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13245 ATLANTIC BLVD.

4-306

JACKSONVILLE, FL 32225 US

Current Mailing Address: New Mailing Address:

13245 ATLANTIC BLVD. 4-306

JACKSONVILLE, FL 32225 US

FEI Number: 02-0661851 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PEPIN-DONAT, CRAIG

CPD ENTERPRISE, LLC

13245 ATLANTÍC BLVD., SUITE 4-306 JACKSONVILLE, FL 32225 US 13245 ATLANTIC BLVD., SUITE 4-306 JACKSONVILLE, FL 32225 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: CRAIG PEPIN-DONAT 01/22/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: CEO (X) Change () Addition Name: PEPIN-DONAT, CRAIG Name: PEPIN-DONAT, CRAIG

Address: 904 SHIPWATCH DR E Address: 904 SHIPWATCH DR E

City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PEPIN-DONAT, ELISABETH Y
 Name:

 Address:
 13245 ATLANTIC BLVD.
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CRAIG PEPIN-DONAT CEO 01/22/2006