


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Sep 05, 2006 8:00 am**  
**Secretary of State**

09-05-2006 90050 025 \*\*\*\*55.00

DOCUMENT # L03000028041 1. Entity Name BALANCE GYM, LLC	
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Principal Place of Business 1032 GOODLETTE ROAD NAPLES, FL 34102	Mailing Address 1032 GOODLETTE ROAD NAPLES, FL 34102
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40102726



07232006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 13-4259385	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  BUECHEL, JEANNE 1032 GOODLETTE ROAD NAPLES, FL 34102
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**DO NOT WRITE  
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 *Jeanne Buechel* (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BUECHEL, JEANNE Frederick F. Buechel, 1032 GOODLETTE ROAD Jr. MD NAPLES, FL 34102
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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: *Jeanne Buechel* 8/14/06 239 253 7832  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR A AUTHORIZED REPRESENTATIVE Date Daytime Phone