2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042634

Entity Name: HEALTHQUEST FITNESS AND THERAPY, LLC

FILED May 30, 2004 Secretary of State

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

4633 PINE GROVE DR. 5458 TOWN CENTER ROAD DELRAY BEACH, FL 33445 US

SUITE 15

BOCA RATON, FL 33486

Current Mailing Address: New Mailing Address:

5458 TOWN CENTER ROAD 4633 PINE GROVE DR. DELRAY BEACH, FL 33445 US

SUITE 15

BOCA RATON, FL 33486 US

FEI Number: 56-2412588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

EDELSON, KENNETH EDELSON, KENNETH B 4633 PINE GROVE DR. 4633 PINE GROVE DR.

DELRAY BEACH, FL 33445 US DELRAY BEACH, FL 33445 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: KENNETH B. EDELSON 05/30/2004

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGRM () Delete MGRM (X) Change () Addition

EDELSON, KENNETH EDELSON, KENNETH B Name: Name: Address: 4633 PINE GROVE DR. Address: 4633 PINE GROVE DR. City-St-Zip: DELRAY BEACH, FL 33445 US City-St-Zip: DELRAY BEACH, FL 33445 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KENNETH B. EDELSON 05/30/2004