

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**

**Apr 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000026667**

1. Entity Name  
ABUNDANT FITNESS, L.L.C.



Principal Place of Business  
1126 FIRST STREET SOUTH  
WINTER HAVEN, FL 33880

Mailing Address  
1126 FIRST STREET SOUTH  
WINTER HAVEN, FL 33880



02082006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
47-0939821

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SMITH, CHARLOTTE L  
1126 FIRST STREET SOUTH  
WINTER HAVEN, FL 33880

**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 \_\_\_\_\_

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, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	SMITH, CHARLOTTE L
STREET ADDRESS	1610 REYNOLDS ROAD, LOT 351
CITY-ST-ZIP	LAKELAND, FL 33801

TITLE	MGR
NAME	SMITH, GEORGE W
STREET ADDRESS	1610 REYNOLDS ROAD, LOT 351
CITY-ST-ZIP	LAKELAND, FL 33801

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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IN THIS SPACE**

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05/06/06-80012-011 50.00

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:** Charlotte L Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/18/2006 863-299-3777

Date

Daytime Phone #