

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073277

FILED
Jan 03, 2005
Secretary of State

Entity Name: IT'S MY TIME FITNESS CENTER - LUTZ, LLC

Current Principal Place of Business:

19125 AUTUMN WOODS AVENUE
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

19125 AUTUMN WOODS AVENUE
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 20-1746920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HICKS, ALLISON ESQ.
3550 BUSCHWOOD PARK DRIVE
SUITE 320
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

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

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BANKS, LORRAINE
Address: 3150 CASTLE ROCK CIRCLE
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: MGRM () Delete
Name: COYOTE CALL ENTERPRI, SES, INC.
Address: 19125 AUTUMN WOODS AVENUE
City-St-Zip: TAMPA, FL 33647 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEPHEN FLANNERY

PRES

01/03/2005

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