


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

03-27-2006 90044 047 ****50.00

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| DOCUMENT # L05000038089 1. Entity Name NP GYM, LLC | |  | | | | | | | | | | | | | | | | | |
| Principal Place of Business 2001 NORTH U.S. HIGHWAY ONE, SUITE 6-C JUPITER, FL 33477 | | Mailing Address 2001 NORTH U.S. HIGHWAY ONE, SUITE 6-C JUPITER, FL 33477 | | | | | | | | | | | | | | | | | |
| 2. Principal Place of Business 201 N US HWY 1 Suite, Apt. #, etc. C-6 City & State JUPITER FL Zip 33477 | | 3. Mailing Address 201 N US HWY 1 Suite, Apt. #, etc. C-6 City & State JUPITER FL Zip 33477 | | | | | | | | | | | | | | | | | |
| Country Country | | Country Country | | | | | | | | | | | | | | | | | |
| 4. FEI Number 20-2737094 | | Applied For Not Applicable | | | | | | | | | | | | | | | | | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | | 03162006 Chg-LLC CR2E083 (11/05) | | | | | | | | | | | | | | | | | |
| 6. Name and Address of Current Registered Agent GOLDSMITH, JEFFREY 201 NORTH U.S. HIGHWAY ONE, SUITE 6-C JUPITER, FL 33477 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | | | | | | | | | | | | | | | | | |
| 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 <i>Jeffrey H. Goldsmith</i> DATE 03/16/06 <small>(NOTE: Registered Agent signature required when reinstating)</small> | | | | | | | | | | | | | | | | | | | |
| Filing Fee is \$50.00 Due by May 1, 2006 | | Make check payable to Florida Department of State | | | | | | | | | | | | | | | | | |
| 9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:70%;">Delete <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table> | | TITLE | Delete <input type="checkbox"/> | NAME | | STREET ADDRESS | | CITY - ST - ZIP | | 10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:70%;">Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table> | | TITLE | Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/> | NAME | | STREET ADDRESS | | CITY - ST - ZIP | |
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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: <i>Jeffrey H. Goldsmith</i> | | Date: 03/16/06 561-743-3700 | | | | | | | | | | | | | | | | | |

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