2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000049269

Entity Name: JODE LADIES HEALTH AND FITNESS, LLC

FILED Feb 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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2843 TORRANCE DRIVE 35370 STATE ROAD 54 LAND O' LAKES, FL 34638 ZEPHYRHILLS, FL 33541

Current Mailing Address: New Mailing Address:

2843 TORRANCE DRIVE 35370 STATE ROAD 54 LAND O' LAKES, FL 34638 ZEPHYRHILLS, FL 33541

FEI Number: 27-0123400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROVI, JOHN C
13902 NORTH DALE MABRY HWY, SUITE 229
TAMPA, FL FL33618 US

ROVI, JOHN C
35370 STATE ROAD 54
ZEPHYRHILLS, FL 33541 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: JOHN C ROVI 02/21/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 ROVI, JOHN C

 Address:
 Address:
 2843 TORRANCE DR

 City-St-Zip:
 City-St-Zip:
 LAND O LAKES, FL 34638 US

Title: () Delete Title: MGRM () Change (X) Addition

Name:Name:CHAMPION, DEBRA JAddress:Address:2843 TORRANCE DRCity-St-Zip:City-St-Zip:LAND O LAKES, FL 34638 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DEBRA J CHAMPION MGRM 02/21/2006