

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060542

Entity Name: 4EVER FITNESS, LLC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

795 BIRO DRIVE
PORT ORANGE, FL 32129

Current Mailing Address:

795 BIRO DRIVE
PORT ORANGE, FL 32129

New Principal Place of Business:

4639 CLYDE MORRIS BLVD
SUITE # 104
PORT ORANGE, FL 32129

New Mailing Address:

4639 CLYDE MORRIS BLVD
SUITE # 104
PORT ORANGE, FL 32129

FEI Number: 20-3211459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURCOTTE, MICHAEL D
795 BIRO DRIVE
PORT ORANGE, FL 32129 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/MANAGERS:

Title: MGR () Delete
Name: MCCARTHY, LYNN
Address: 858 NIXON LANE
City-St-Zip: PORT ORANGE, FL 32129

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: THOMPSON, FRANK L
Address: 113 PALMWOOD DRIVE
City-St-Zip: PALM COAST, FL 32164

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: MICHAEL D. TURCOTTE

RA

04/29/2006

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