## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063116

TOMA, PATRICK

**DAVIE, FL 33330** 

12555 ORANGE DR STE 230

Name:

Address:

City-St-Zip:

Entity Name: SEMINOLE HEALTH CLUB, LLC

FILED Feb 07, 2007 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 12555 ORANGE DR STE 230 **DAVIE, FL 33330 Current Mailing Address: New Mailing Address:** 12555 ORANGE DR STE 230 DAVIE, FL 33330 FEI Number: 20-5094241 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: MATTHEW J KAHN, PA 12555 ORANGE DR. STE 230 DAVIE, FL 33330 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete 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 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: PATRICK TOMA MGR 02/07/2007