

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000080459

FILED
Apr 08, 2008
Secretary of State

Entity Name: PILATES ON THE MOVE, LLC

Current Principal Place of Business:

12 WINEWOOD CT
FORT MYERS, FL 33919 US

New Principal Place of Business:

6310-4 TECHSTER BOULEVARD
FORT MYERS, FL 33966 US

Current Mailing Address:

12 WINEWOOD CT
FORT MYERS, FL 33919 US

New Mailing Address:

6310-4 TECHSTER BOULEVARD
FORT MYERS, FL 33966 US

FEI Number: 20-5370019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LA CROIX, MINETTE L
12050 SUMMERGATE CIR, C-102
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

FORRESTER, JIM L
1429 COLONIAL BLVD
SUITE 201
FORT MYERS, FL 33907-106 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: JIM FORRESTOR

04/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ENTERPRISES BY CHRIS, TY, INC.
Address: 12 WINEWOOD CT
City-St-Zip: FORT MYERS, FL 33913 US

Title: MGRM () Delete
Name: A-LINE PILATES, INC.,
Address: 4224 LIRON AVE, #201
City-St-Zip: FORT MYERS, FL 33916 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 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: CHRISTY M DEMOND

VP

04/08/2008

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