

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102364

FILED  
Aug 03, 2007  
Secretary of State

**Entity Name:** ADA'S FITNESS CENTERS, LLC

**Current Principal Place of Business:**

103 WELLINGTON AVENUE  
LEHIGH ACRES, FL 33972

**New Principal Place of Business:**

**Current Mailing Address:**

103 WELLINGTON AVENUE  
LEHIGH ACRES, FL 33972

**New Mailing Address:**

FEI Number: 20-5729377      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

A1A REGISTERED AGENT INC.  
92 SADBERRY ROAD  
QUINCY, FL 32351      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:**

Title: MGRM      ( ) Delete  
Name: BONADIES, EDWARD  
Address: 103 WELLINGTON AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: MGRM      ( ) Delete  
Name: WATERHAWK, TARA  
Address: 103 WELLINGTON AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33972

**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: EDWARD BONADIES

MGRM

08/03/2007

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