

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000028746

Entity Name: FITNESS DEPOT, LLC

FILED
May 16, 2009
Secretary of State

Current Principal Place of Business:

6561 102ND AVE N
PINELLAS PARK, FL 33782

New Principal Place of Business:

Current Mailing Address:

6561 102ND AVE N
PINELLAS PARK, FL 33782

New Mailing Address:

FEI Number: 06-1808019 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:

CALABRESE, LISA
237 BROOKSIDE COURT
PALM HARBOR, FL 34683 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: MS () Delete
Name: CALABRESE, LISA M
Address: 237 BROOKSIDE COURT
City-St-Zip: PALM HARBOR, FL 34683 US

Title: MR () Delete
Name: AKERLUND, JACK
Address: 237 BROOKSIDE COURT
City-St-Zip: PALM HARBOR, FL 34683

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: LISA CALABRESE

MS.

05/16/2009

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