2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# L07000036429

Entity Name: MIKE WALKER FITNESS, LLC

Current Principal Place of Business:

810 ALABAMA AVENUE
LYNN HAVEN, FL 32444 US

New Principal Place of Business:

806 W HWY 390
LYNN HAVEN, FL 32444 US

Current Mailing Address:

810 ALABAMA AVENUE
LYNN HAVEN, FL 32444 US

New Mailing Address:

806 W HWY 390
LYNN HAVEN, FL 32444 US

FEI Number: 20-8810647 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WALKER, MICHAEL J
810 ALABAMA AVENUE
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

WALKER, MICHAEL J
806 W HWY 390
LYNN HAVEN, FL 32444 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: MICHAEL J WALKER 04/27/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: WALKER, AMANDA J MANAGER
Address: 806 W HWY 390
City-St-Zip: LYNN HAVEN, FL 32444 US

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: AMANDA J WALKER MGR 04/27/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date