

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036429

FILED
Apr 02, 2009
Secretary of State

Entity Name: MIKE WALKER FITNESS, LLC

Current Principal Place of Business:

806 W HWY 390
LYNN HAVEN, FL 32444 US

New Principal Place of Business:

Current Mailing Address:

806 W HWY 390
LYNN HAVEN, FL 32444 US

New Mailing Address:

FEI Number: 20-8810647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, MICHAEL J
806 W HWY 390
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WALKER, MICHAEL 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: MICHAEL J WALKER

MGR

04/02/2009

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