2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L07000043355

Entity Name: FITNESS NUTRITION, LLC

Current Principal Place of Business:

4132 BOSTON COURT
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

4132 BOSTON COURT
WESTON, FL 33331

New Mailing Address:

FEI Number: 20-8961567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOHBERG, MICHAEL
4132 BOSTON CT.
WESTON, FL 33331 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: LOHBERG, MICHAEL
Address: 32 BOSTON COURT
City-St-Zip: WESTON, FL 33331

Title: MGR ( ) Delete
Name: MONAGHAN, BRUCE
Address: 4132 BOSTON COURT
City-St-Zip: WESTON, FL 33331

Title: MGR ( ) Delete
Name: TORRES, DARA G
Address: 9840 BAY LEAF CT.
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LOHBERG, MICHAEL
Address: 4132 BOSTON COURT
City-St-Zip: WESTON, FL 33331

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: BRUCE MONAGHAN MGR 04/30/2009

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