

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000123998

Entity Name: PERFORMANCELAX, LLC

FILED
Jul 03, 2009
Secretary of State

Current Principal Place of Business:

5507 CONTENTO DRIVE
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5275
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 33-1196865 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CARVER, JAMES
5507 CONTENTO DRIVE
SARASOTA, FL 34242 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: MGRM () Delete
Name: WIGHT, CLAYTON
Address: 1451 SOUTH SHADE AVENUE
City-St-Zip: SARASOTA, FL 34239

Title: MGRM () Delete
Name: CARVER, JAMES
Address: 5507 CONTENTO DRIVE
City-St-Zip: SARASOTA, FL 34242

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: CLAYTON WIGHT

MR.

07/03/2009

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