

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000006020

Entity Name: NEIGHBOR FITNESS LLC

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1130 ARRINGTON CIR  
OVIEDO, FL 32765

**New Principal Place of Business:**

1791 EAST BROADWAY ST  
OVIEDO, FL 32765

**Current Mailing Address:**

1130 ARRINGTON CIR  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 26-1764349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PRIDEMORE, KAREN L  
1130 ARRINGTON CIR  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

PRIDEMORE, JAMES N  
1130 ARRINGTON CIR  
OVIEDO, FL 32765 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: J.N. PRIDEMORE

03/31/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PRIDEMORE, JAMES N  
Address: 1130 ARRINGTON CIR  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM  
Name: PARSONS, IAN  
Address: 2950 BROADLEAF CT  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM  
Name: PARSONS, FIONA  
Address: 2950 BROADLEAF CT  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM  
Name: PRIDEMORE, KAREN L  
Address: 1130 ARRINGTON CIR  
City-St-Zip: OVIEDO, FL 32765

I hereby 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: J.N. PRIDEMORE

MGRM

03/31/2010

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