

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000018465

Entity Name: TMYERSFITNESSLLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1232 VERSANT PLACE DR. # 101  
BRANDON, FL 33511

**New Principal Place of Business:**

336 GOLFVIEW RD. # 1112  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

336 GOLFVIEW RD. # 1112  
NORTH PALM BEACH, FL 33408

**New Mailing Address:**

FEI Number: 83-0503060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MYERS, TIM S  
336 GOLFVIEW RD.  
# 1112  
NORTH PALM BEACH, FL 33408 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  
Name: MYERS, TIM S  
Address: 336 GOLFVIEW RD. # 1112  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: TIM MYERS

PRES

04/30/2012

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