

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019968

FILED  
Jan 17, 2012  
Secretary of State

**Entity Name:** LIVE FIT, LLC

**Current Principal Place of Business:**

12714 DUPONT CIRCLE  
TAMPA, FL 33626 US

**New Principal Place of Business:**

**Current Mailing Address:**

12714 DUPONT CIRCLE  
TAMPA, FL 33626 US

**New Mailing Address:**

FEI Number: 26-2065430

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOEDE, LORI A  
12708 EAGLES ENTRY DR  
ODESSA, FL 33556 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  
Name: GOEDE, LORI A  
Address: 12708 EAGLES ENTRY DR  
City-St-Zip: ODESSA, FL 33556 US

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: LORI GOEDE

MGRM

01/17/2012

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