

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042003

FILED
Jan 12, 2009
Secretary of State

Entity Name: FITNESS TOGETHER ATLANTIC, LLC

Current Principal Place of Business:

4887 BELFORT ROAD STE 201
JACKSONVILLE, FL 32256

New Principal Place of Business:

13457 ATLANTIC BOULEVARD
3
JACKSONVILLE, FL 32225

Current Mailing Address:

41 PGA TOUR BOULEVARD
PONTE VEDRA BEACH, FL 32081

New Mailing Address:

41 PGA TOUR BOULEVARD
PONTE VEDRA BEACH, FL 32082

FEI Number: 26-2547053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUNN, MARSHALL D JR
4887 BELFORT ROAD STE 201
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

GREER, WESLEY M
41 PGA TOUR BOULEVARD
PONTE VEDRA BEACH, FL 32082 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: WESLEY M. GREER

01/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GUNN, MARSHALL D JR
Address: 4887 BELFORT ROAD STE 201
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR () Delete
Name: GREER, WESLEY M
Address: 1013 6TH AVE. N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: MGR () Delete
Name: GUNN, MARSHALL
Address: 4414 CATHEYS CLUB LANE
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGR () Delete
Name: WILEY, GILES R
Address: 1278 LINKSIDE DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: MGR () Delete
Name: BARTON, WILLIAM F
Address: 145 BRISTOL PLACE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WESLEY M. GREER

MGR

01/12/2009

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