

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000054728

Entity Name: HALO FITNESS, LLC

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

10000 GATE PARKWAY NORTH  
#1214  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

10000 GATE PARKWAY NORTH  
#1214  
JAX, FL 32246

**New Mailing Address:**

400 TIMBERWALK CT.  
#1327  
PONTE VEDRA BEACH, FL 32082

FEI Number: 26-2667846

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARSON, TRACY L  
10000 GATE PARKWAY NORTH  
#1214  
JACKSONVILLE, FL 32246 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: CARSON, TRACY L  
Address: 10000 GATE PARKWAY NORTH, #1214  
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGRM  
Name: ALEX, ROGER I  
Address: 10000 GATE PARKWAY NORTH, #1214  
City-St-Zip: JACKSONVILLE, FL 32246

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: TRACY CARSON

MGRM

04/22/2010

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