

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061202

Entity Name: CALTA'S FITNESS B LLC

FILED  
May 01, 2009  
Secretary of State

**Current Principal Place of Business:**

4913 W WATERS AV  
TAMPA, FL 33634 US

**New Principal Place of Business:**

**Current Mailing Address:**

4913 W WATERS AV  
TAMPA, FL 33634 US

**New Mailing Address:**

FEI Number: 26-2861819      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SARDEGNA, ROBERT JR  
706 DRUID LN  
LUTZ, FL 33548 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 ( ) Delete  
Name: SARDEGNA, ROBERT JR  
Address: 706 DRUID LN  
City-St-Zip: LUTZ, FL 33548 US

Title: MGRM ( ) Delete  
Name: CALTA, TREON  
Address: 29741 BIRDS EYE DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543 US

**ADDITIONS/CHANGES:**

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: ROBERT SARDEGNA JR

MGRM

05/01/2009

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