

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000113411

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** JABZ HEALTH & FITNESS, LLC

**Current Principal Place of Business:**

2151 TRADE CENTER WAY  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

2151 TRADE CENTER WAY  
NAPLES, FL 34109 US

**New Mailing Address:**

**FEI Number:** 26-3851845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PITKIN, JERALD R ESQ  
9915 TAMiami TRAIL N  
SUITE 1  
NAPLES, FL 34108 US

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

PITKIN, JERALD R ESQ  
900 SIXTH AVE S.  
SUITE 101  
NAPLES, FL 34102 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: JERALD R. PITKIN

04/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PITKIN, JERALD R  
Address: 2151 TRADE CENTER WAY  
City-St-Zip: NAPLES, FL 34109 US

Title: MGRM  
Name: PITKIN, HEATHER A  
Address: 2151 TRADE CENTER WAY  
City-St-Zip: NAPLES, FL 34109 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: HEATHER A. PITKIN

MGRM

04/29/2010

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