

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000100967

FILED  
Feb 26, 2011  
Secretary of State

Entity Name: FNA SPORTS NUTRITION, LLC

**Current Principal Place of Business:**

1804 TAMIAMI TR.  
E-3  
PORT CHARLOTTE, FL 33948 US

**New Principal Place of Business:**

**Current Mailing Address:**

20431 BOWEN ROAD  
NORTH FORT MYERS, FL 33917

**New Mailing Address:**

20431 BOWEN ROAD  
NORTH FORT MYERS, FL 33917 UN

FEI Number: 27-1144320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DELUCCA, FRANK  
20431 BOWEN ROAD  
NORTH FORT MYERS, FL 33917 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: DELUCCA, FRANK  
Address: 20431 BOWEN ROAD  
City-St-Zip: NORT FORT MYERS, FL 33917 UN

Title: MGRM  
Name: DELUCCA, AMY R  
Address: 20431 BOWEN ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917 UN

Title: MGRM  
Name: DELUCCA, FRANK  
Address: 20431 BOWEN ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917 UN

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City-St-Zip: NORTH FORT MYERS, FL 33917 UN

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: FRANK DELUCCA

MGRM

02/26/2011

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