

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000101024

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** BRIAN LOWE'S FITNESS LLC

**Current Principal Place of Business:**

405 NORTHLAKE BLVD  
1055  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

405 NORTHLAKE BLVD  
1055  
ALTAMONTE SPRINGS, FL 32701 UN

**Current Mailing Address:**

405 NORTHLAKE BLVD  
1055  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

**FEI Number:** 27-1105315      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NOVAK, DIANE  
479 HOLBROOK COURT  
LAKE MARY, FL 32746 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:** MGR  
**Name:** LOWE, BRIAN  
**Address:** 405 NORTHLAKE BLVD #1055  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701

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: BRIAN LOWE

MGR

04/22/2012

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