

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000007486

FILED
Apr 18, 2012
Secretary of State

Entity Name: ATHLETIC RECOVERY ZONE, LLC

Current Principal Place of Business:

2575 EDISON AVENUE
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

2575 EDISON AVENUE
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number: 27-1762864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, STEPHEN
26243 WILLIE HODGES ROAD
HILLIARD, FL 32046 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: JOHNSON, STEPHEN
Address: 26243 WILLIE HODGES ROAD
City-St-Zip: HILLIARD, FL 32046

Title: MGRM
Name: CHANEY, MICHAEL E
Address: 1408 JUNIOR ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM
Name: QUILLEN, WILLIAM
Address: 1403 STARWAN ROAD E.
City-St-Zip: JACKSONVILLE, FL 32211

Title: MGRM
Name: COTHREN, BRIAN
Address: 7686 RIVER AVENUE
City-St-Zip: FLEMING ISLAND, FL 32003

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 COTHREN

MGR

04/18/2012

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