

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000125848

Entity Name: RIVERSIDE FITNESS LLC

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4104 LENOX AVE. #5  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

4104 LENOX AVE.  
5  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

4104 LENOX AVE. #5  
JACKSONVILLE, FL 32254

**New Mailing Address:**

4104 LENOX AVE  
5  
JACKSONVILLE, FL 32254

FEI Number: 27-4396648

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAMSON, JOHN T  
1655 THE GREENS WAY #3111  
JACKSONVILLE BEACH, FL 32250 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: WILLIAMSON, JOHN T  
Address: 1655 THE GREENS WAY #3111  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: JOHN WILLIAMSON

MGR

01/09/2012

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