

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001124

FILED
Jul 11, 2006
Secretary of State

Entity Name: FITNESS FORUM SERVICES, LLC

Current Principal Place of Business:

231 WALTON STREET
STE 200
SYRACUSE, NY 13202

New Principal Place of Business:

Current Mailing Address:

231 WALTON STREET
STE 200
SYRACUSE, NY 13202

New Mailing Address:

FEI Number: 16-1506400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

UCC FILING & SEARCH SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SMITH, JAMES H
Address: 6021 SINGLETREE LANE
City-St-Zip: JAMESVILLE, NY 13078

Title: MGR () Delete
Name: EAGAN, MARK
Address: 1477 COUNTY ROUTE 9
City-St-Zip: FULTON, NY 13069

Title: MGR () Delete
Name: JONES, PATRICK
Address: 380 CEMETARY ROAD
City-St-Zip: OSWEGO, NY 13126

Title: MGR () Delete
Name: SLIVKA, DAVID
Address: 72 CHAUCER CIRCLE
City-St-Zip: BALDWINVILLE, NY 13027

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: DAVID SLIVKA

MGR

07/11/2006

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