

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005669

FILED
Aug 15, 2006
Secretary of State

Entity Name: REVOLUTIONARY THERAPY & FITNESS, LLC

Current Principal Place of Business:

3343 BEACHTREE ROAD N.E., SUITE 1600
ATLANTA, GA 30026

New Principal Place of Business:

3343 PEACHTREE ROAD N.E., SUITE 1600
ATLANTA, GA 30326

Current Mailing Address:

3343 BEACHTREE ROAD N.E., SUITE 1600
ATLANTA, GA 30026

New Mailing Address:

3343 PEACHTREE ROAD N.E., SUITE 1600
ATLANTA, GA 30326

FEI Number: 38-3727345 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

CAPITOL CORPORATE SERVICES, INC.
1333 DUVAL STREET
TALLAHASSEE, FL 32303 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 () Delete
Name: BINDER, BROOKS W
Address: 3343 BEACHTREE ROAD N.E., SUITE 1600
City-St-Zip: ATLANTA, GA 30026

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BINDER, BROOKS W
Address: 3343 PEACHTREE ROAD N.E., SUITE 1600
City-St-Zip: ATLANTA, GA 30326

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: BROOKS W. BINDER

MR.

08/15/2006

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