

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000004393

**Entity Name:** TRUE PILATES OF DE, LLC

**FILED  
Jul 21, 2011  
Secretary of State**

**Current Principal Place of Business:**

4320 NE 20TH AVE  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

4320 NE 20TH AVE  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 32-0036327      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: FOX, MICHAEL K  
Address: 4320 NE 20TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGRM  
Name: PACE, DARIA S  
Address: 4320 NE 20TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33308

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: MICHAEL KLERY FOX

MGRM

07/21/2011

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