2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# M09000002009

Entity Name: HEALTHSOURCE FITNESS SOLUTIONS, LLC

Current Principal Place of Business:

6465 WAYZATA BLVD SUITE 660
ST LOUIS PARK, MN 55426

New Principal Place of Business:

Current Mailing Address:

6465 WAYZATA BLVD SUITE 660
ST LOUIS PARK, MN 55426

New Mailing Address:

FEI Number: 26-4247212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

D'AMOURS, ANGELA
6743 SOUTHPOINT DRIVE NORTH
JACKSONVILLE, FL 322160980 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: MR
Name: BOYLE, EDWARD T CEO
Address: 6465 WAYZATA BLVD. SUITE 660
City-St-Zip: ST. LOUIS PARK, MN 55426

Title: MRS
Name: KRUSE, MARY P
Address: 6465 WAYZATA BLVD. SUITE 660
City-St-Zip: ST. LOUIS PARK, MN 55426

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 Statues.

SIGNATURE: EDWARD T. BOYLE CEO 01/05/2011

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