## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000069732

Entity Name: NAPLES PERSONAL TRAINING, LLC

## **Current Principal Place of Business:**

1575 PINE RIDGE ROAD #20 NAPLES, FL 34109

# **Current Mailing Address:**

1575 PINE RIDGE ROAD #20 NAPLES, FL 34109 US

## FEI Number: 45-2536570

## Name and Address of Current Registered Agent:

WELLS, SEAN M 1575 PINE RIDGE ROAD 20 NAPLES, FL 34109 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: SEAN M WELLS

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

TitleMGRNameWELLS, SEAN MAddress1575 PINE RIDGE ROAD<br/>#20City-State-Zip:NAPLES FL 34109

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

| SIGNATURE: SEAN M. WELLS | MANAGING     | 02/26/2014 |
|--------------------------|--------------|------------|
|                          | MEMBER/OWNER |            |

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 26, 2014 Secretary of State CC1972653468

Certificate of Status Desired: No

02/26/2014 Date

Date