

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000015971

Entity Name: TOM FOWKES TENNIS FITNESS, LLC

Current Principal Place of Business:

200 LESLIE DRIVE
921
HALLANDALE, FL 33009

Current Mailing Address:

200 LESLIE DRIVE
921
HALLANDALE, FL 33009

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUDEC, RAMON
13899 BISCAYNE BLVD
415
NORTH MIAMI, FL 33181 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

Authorized Person(s) Detail :

Title MGR
Name FOWKES, THOMAS M
Address 200 LESLIE DRIVE, 921
City-State-Zip: HALLANDALE FL 33009

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: THOMAS FOWKES

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date