

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000100646

**FILED
Mar 01, 2018
Secretary of State
CC9554210607**

Entity Name: CONTRAILS FITNESS PARTNERS, LLC

Current Principal Place of Business:

10500 ULMERTON RD #200
LARGO, FL 33771

Current Mailing Address:

PO BOX 18203
TAMPA, FL 33679 US

FEI Number: 47-1180241

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANITA'S ACCOUNTING SOLUTIONS, PLLC
3113 S DALE MABRY HWY SUITE A
TAMPA, FL 33629 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 MEMBER
Name SPRANGER, KURT T
Address 1815 W WATROUS AVE
City-State-Zip: TAMPA FL 33606

Title MGR
Name SPRANGER, MALIA K
Address 1815 W WATROUS AVE
City-State-Zip: TAMPA FL 33606

Title MEMBER
Name HALLINAN, MELISSA
Address PO BOX 18203
City-State-Zip: TAMPA FL 33679

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: KURT SPRANGER

MEMBER

03/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date