

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000168621

Entity Name: FYZICAL FITNESS, LLC

Current Principal Place of Business:

505 SOUTH ORANGE AVENUE, SUTIE 101
SARASOTA, FL 34236

Current Mailing Address:

505 SOUTH ORANGE AVENUE, SUTIE 101
SARASOTA, FL 34236

FEI Number: 47-2231635

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROSS STREET CORPORATE SERVICES, LLC
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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 OTHER
Name FLORIDA FITNESS & REHAB
Address 18900 N. TAMIAMI TR
SUITE A5
City-State-Zip: NORTH FORT MYERS FL 33903

Title MANAGER
Name MULVEY, CHRIS
Address 505 SOUTH ORANGE AVENUE, SUTIE
101
City-State-Zip: SARASOTA FL 34236

Title MANAGING MEMBER
Name ABRAMS, JAMES
Address 505 SOUTH ORANGE AVENUE, SUTIE
101
City-State-Zip: SARASOTA FL 34236

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: JAMES ABRAMS

MANAGER

03/20/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date