

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000136289

**Entity Name:** TRIFORCE FITNESS, LLC

**Current Principal Place of Business:**

310 COMMERCE LAKE DRIVE  
#112  
ST AUGUSTINE, FL 32095

**Current Mailing Address:**

83 NINEWELLS LANE  
ST. JOHN'S, FL 32259 US

**FEI Number:** 82-1920322

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAVIS, CHRISTOPHER E  
83 NINEWELLS LANE  
ST. JOHN'S, FL 32259 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:** CHRISTOPHER DAVIS

02/10/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AP  
Name DAVIS, CHRISTOPHER E  
Address 83 NINEWELLS LANE  
City-State-Zip: ST. JOHN'S FL 32259

*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:** CHRISTOPHER DAVIS

OWNER

02/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date