

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000260987

Entity Name: FLORIDA FITNESS WORKS 4, LLC**Current Principal Place of Business:**3100 S FEDERAL HWY #1
DELRAY BEACH, FL 33483**Current Mailing Address:**3100 S FEDERAL HWY #1
DELRAY BEACH, FL 33483 US**FEI Number:** 82-3813667**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RODGERS, CHRISTOPHER L
3100 S FEDERAL HWY #1
DELRAY BEACH, FL 33483 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 AMBR
Name RODGERS, CHRISTOPHER
Address 22155 CANDLE CT
City-State-Zip: BOCA RATON FL 33428Title AMBR
Name SMITH, WILLIAM D
Address 2740 MONTICELLO WAY
City-State-Zip: KISSIMMEE FL 34741Title MEMBER
Name MOTES, JAMES
Address 19145 S. O'BRIEN ROAD
City-State-Zip: GROVELAND FL 34736

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 RODGERS

OWNER/MEMBER

03/16/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date