

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000213985

**Entity Name:** BIBBY FITNESS LLC

**Current Principal Place of Business:**

6136 KATHLEEN RD  
SUITE 538  
KATHLEEN, FL 33849

**Current Mailing Address:**

6136 KATHLEEN RD.  
SUITE 1102  
KATHLEEN, FL 33849 US

**FEI Number:** 85-2255982

**Certificate of Status Desired:** No

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

BIBBY, DEIDRA  
5629 SAWYER RD  
LAKELAND, FL 33810 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           | AR                | Title           | MGR                      |
| Name            | BIBBY, DEIDRA A   | Name            | BIBBY, CHRISTOPHER A SR. |
| Address         | 5629 SAWYER RD    | Address         | 5629 SAWYER RD           |
| City-State-Zip: | LAKELAND FL 33810 | City-State-Zip: | LAKELAND FL 33810        |

*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:** BIBBY, DEIDRA A

**CEO**

**04/22/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date