

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000348964

**Entity Name:** NEWTS FAMILY FITNESS LLC

**Current Principal Place of Business:**

35595 US HWY 19N STE 189  
PALM HARBOR, FL 34684

**Current Mailing Address:**

35595 US HWY 19N STE 189  
PALM HARBOR, FL 34684 US

**FEI Number:** 85-3900554

**Certificate of Status Desired:** No

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

KADILLAC ENTERPRISES LLC  
35595 US HWY 19N STE 189  
PALM HARBOR, FL 34684 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	MGR	Title	MGR
Name	NEWTON, DAVID	Name	NEWTON, TIFFANY
Address	3502 S 65TH W AVE	Address	3502 S 65TH W AVE
City-State-Zip:	TULSA OK 74107	City-State-Zip:	TULSA OK 74107

*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:** DAVID NEWTON

MGR

02/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date