## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000427875

Entity Name: FITNESS VENTURES - EVANSVILLE, LLC

ity Name. Firmess ventores - Evansville,

**Current Principal Place of Business:** 

999 DOUGLAS AVENUE, SUITE 3328 ALTAMONTE SPRINGS, FL 32714

## **Current Mailing Address:**

999 DOUGLAS AVENUE, SUITE 3328 ALTAMONTE SPRINGS. FL 32714 US

FEI Number: 92-0629128 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WILLIAM R. LOWMAN, JR., ESQ. SHUFFIELD, LOWMAN & WILSON, P.A. 1000 LEGION PLACE, SUITE 1700 ORLANDO, FL 32801 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

FILED Apr 04, 2023

**Secretary of State** 

4095340595CC

## Authorized Person(s) Detail:

Title AMBR Title CEO

Name FITNESS VENTURES, LLC Name HIBBARD, BRIAN J

Address 999 DOUGLAS AVENUE, SUITE 3328 Address 999 DOUGLAS AVENUE, SUITE 3328
City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title PRESIDENT Title SECRETARY, TREASURER

Name TESCHKE, JEFFREY J Name CASELLA, KYLE A

Address 999 DOUGLAS AVENUE, SUITE 3328 Address 999 DOUGLAS AVENUE, SUITE 3328
City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: BRIAN J. HIBBARD

CEO

04/04/2023