

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000003760

Entity Name: B&B FITNESS PG, INC.

Current Principal Place of Business:

2170 SOUTH PARKER ROAD
SUITE 251
DENVER, CO 80231

FILED
Mar 21, 2019
Secretary of State
9413541129CC

Current Mailing Address:

220 S. RIDGEWOOD AVE.
DAYTONA BEACH, FL 32114 US

FEI Number: 47-4712958

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Officer/Director Detail :

Title DIRECTOR
Name ESPOSITO, JOHN M.
Address 2800 N CENTRAL AVENUE,SUITE
1600
City-State-Zip: PHOENIX AZ 85004

Title DIRECTOR
Name LOTZ, DAVID B.
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title PRESIDENT & DIRECTOR
Name SARTOR, JASON
Address 1660 S. ALBION STREET, SUITE 525
City-State-Zip: DENVER CO 80222

Title VP
Name LANNI, JAMES
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title VP
Name LLOYD, ROBERT W.
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title VP
Name SCHUMACHER, KARA
Address 2170 SOUTH PARKER ROAD
SUITE 251
City-State-Zip: DENVER CO 80231

Title VP
Name WATTS, ANDREW R.
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title SECRETARY
Name DEBELL, TRUDY
Address 2170 SOUTH PARKER ROAD
SUITE 251
City-State-Zip: DENVER CO 80231

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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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY M. ROBINSON

ASSISTANT SECRETARY 03/21/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name SANDERS, MICHELE
Address 2800 N. CENTRAL AVENUE,SUITE 1600
City-State-Zip: PHOENIX AZ 85004

Title ASSISTANT SECRETARY
Name ROBINSON, ANTHONY M.
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114