

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000095057

**FILED**  
**Jan 13, 2020**  
**Secretary of State**  
**4773269243CC**

**Entity Name:** ORLANDO SPORTS TRAINING HOLDINGS LLC

**Current Principal Place of Business:**

25 W. CRYSTAL LAKE STREET  
SUITE 200  
ORLANDO, FL 32806

**Current Mailing Address:**

25 W. CRYSTAL LAKE STREET  
SUITE 200  
ORLANDO, FL 32806

**FEI Number:** 27-3439874

**Certificate of Status Desired:** No

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

SCHWARTZBERG, RANDY  
25 W. CRYSTAL LAKE STREET  
SUITE 200  
ORLANDO, FL 32806 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 MGRM  
Name SCHWARTZBERG, RANDY S  
Address 25 W. CRYSTAL LAKE STREET, SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name REUSS, BRYAN L  
Address 25 W. CRYSTAL LAKE STREET, SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name HALPERIN, LAWRENCE  
Address 25 W. CRYSTAL LAKE STREET, SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name GOLL, STEPHEN R  
Address 25 W. CRYSTAL LAKE STREET SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name WEBER, STEVEN E  
Address 25 W. CRYSTAL LAKE STREET SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name BLICK, SAMUEL S  
Address 25 W. CRYSTAL LAKE STREET, SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name MCBRIDE, G GRADY  
Address 25 W. CRYSTAL LAKE STREET SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name ROSEN, JEFFREY P  
Address 25 W. CRYSTAL LAKE STREET SUITE 200  
City-State-Zip: ORLANDO FL 32806

**Continues on page 2**

*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:** LAWRENCE S HALPERIN

**MANAGER**

**01/13/2020**

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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title MGRM  
Name JONES, CRAIG P  
Address 25 W. CRYSTAL LAKE STREET  
SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name WIERNIK, DANIEL L  
Address 25 W. CRYSTAL LAKE STREET  
SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name BONENBERGER, ERIC G  
Address 25 W. CRYSTAL LAKE STREET  
SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name FUNK, JOSEPH D  
Address 25 W. CRYSTAL LAKE STREET  
SUITE 200  
City-State-Zip: ORLANDO FL 32806

Title MGRM  
Name CHRISTENSEN, ALAN W  
Address 25 W. CRYSTAL LAKE STREET  
SUITE 200  
City-State-Zip: ORLANDO FL 32806