

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000267055

**Entity Name:** ARMED TRAINING FACILITY LLC

**Current Principal Place of Business:**

399 CENTRAL FL PKWY  
ORLANDO, FL 32824

**Current Mailing Address:**

399 CENTRAL FL PKWY  
ORLANDO, FL 32824

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LAWRENCE, DESTEFANO  
3000 HUNTINGTON STREET  
ORLANDO, FL 32803 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:** LAWRENCE DESTEFANO

02/14/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name DESTEFANO, LAWRENCE M  
Address 399 CENTRAL FL PKWY  
City-State-Zip: ORLANDO FL 32824

*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 DESTEFANO

AMBR

02/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date