### 2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000006735

Entity Name: ORLANDO EVENTS CENTER ENTERPRISES, LLC

**FILED** Feb 03, 2022 **Secretary of State** 7973445690CC

## **Current Principal Place of Business:**

400 W CHURCH ST. **SUITE #250** ORLANDO, FL 32801

# **Current Mailing Address:**

400 W CHURCH ST. **SUITE #250** ORLANDO, FL 32801 US

FEI Number: 26-1321611 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Address

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title **MGRM** Title CEO

ORLANDO MAGIC, LTD. MARTINS, ALEX Name Name

> 400 W CHURCH ST. Address 400 W CHURCH ST. **SUITE #250 SUITE #250**

ORLANDO FL 32801 ORLANDO FL 32801 City-State-Zip: City-State-Zip:

Title **CFO** Title VΡ

FREEMAN, CHARLES FRITZ, JAMES T Name Name

400 W CHURCH ST. 400 W CHURCH ST. Address Address

**SUITE #250 SUITE #250** 

ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801 City-State-Zip:

Title VΡ Title VΡ

FORDE, MICHAEL BISSEY, JEFF Name Name

400 W CHURCH ST. 400 W CHURCH ST. Address Address

> **SUITE #250 SUITE #250**

ORLANDO FL 32801 ORLANDO FL 32801 City-State-Zip: City-State-Zip:

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: JAMES T FRITZ **CFO**