

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000006735

**Entity Name:** ORLANDO EVENTS CENTER ENTERPRISES, LLC

**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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ORLANDO MAGIC, LTD.  
Address 400 W CHURCH ST.  
SUITE #250  
City-State-Zip: ORLANDO FL 32801

Title CEO  
Name MARTINS, ALEX  
Address 400 W CHURCH ST.  
SUITE #250  
City-State-Zip: ORLANDO FL 32801

Title CFO  
Name FRITZ, JAMES T  
Address 400 W CHURCH ST.  
SUITE #250  
City-State-Zip: ORLANDO FL 32801

Title PRESIDENT  
Name FREEMAN, CHARLES  
Address 400 W CHURCH ST.  
SUITE #250  
City-State-Zip: ORLANDO FL 32801

Title VP  
Name STURMAN, NYEA  
Address 400 W CHURCH ST.  
SUITE #250  
City-State-Zip: ORLANDO FL 32801

*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:** NYEA STURMAN

**SVP & GENERAL  
COUNSEL**

**04/19/2023**

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

\_\_\_\_\_ Date