


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 28, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000009982</b>	
1. Entity Name TOROXEL TRAINING SERVICES, LLC	

Principal Place of Business 100 W STIRLING WAY LEESBURG, FL 34788	Mailing Address 100 W STIRLING WAY LEESBURG, FL 34788
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DO NOT WRITE IN THIS SPACE



02252008No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-1112332	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

TOROXEL, HEINZ  
100 W STIRLING WAY  
LEESBURG, FL 34788

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

03/11/08-80051-005 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOROXEL, HEINZ 100 W STIRLING WAY LEESBURG, FL 347882781
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOROXEL, CHRISTA 100 W. STIRLING WAY LEESBURG, FL 347882781
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

**SIGNATURE:**  **2-25-08**, **352-357-5959**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #