

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009982

FILED
Jan 17, 2009
Secretary of State

Entity Name: TOROXEL TRAINING SERVICES, LLC

Current Principal Place of Business:

100 W STIRLING WAY
LEESBURG, FL 34788

New Principal Place of Business:

100 W STERLING WAY
LEESBURG, FL 34788

Current Mailing Address:

100 W STIRLING WAY
LEESBURG, FL 34788

New Mailing Address:

100 W STERLING WAY
LEESBURG, FL 34788

FEI Number: 65-1112332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOROXEL, HEINZ
100 W STIRLING WAY
LEESBURG, FL 34788 US

Name and Address of New Registered Agent:

TOROXEL, HEINZ
100 W STERLING WAY
LEESBURG, FL 34788 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:

01/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TOROXEL, HEINZ
Address: 100 W STIRLING WAY
City-St-Zip: LEESBURG, FL 347882781

Title: MGRM () Delete
Name: TOROXEL, CHRISTA
Address: 100 W. STIRLING WAY
City-St-Zip: LEESBURG, FL 347882781

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TOROXEL, HEINZ
Address: 100 W STERLING WAY
City-St-Zip: LEESBURG, FL 347882781

Title: MGRM (X) Change () Addition
Name: TOROXEL, CHRISTA
Address: 100 W. STERLING WAY
City-St-Zip: LEESBURG, FL 347882781

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: HEINZ TOROXEL

MGR.

01/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date