

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020314

Entity Name: ORC TRAINING, LLC

FILED  
Jan 09, 2008  
Secretary of State

**Current Principal Place of Business:**

439 NE 7TH AVENUE  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

439 NE 7TH AVENUE  
FORT LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 03-0376974

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COLAN MUTH, CATHERINE  
Address: 4201 N OCEAN DRIVE # 206  
City-St-Zip: HOLLYWOOD, FL 33019

Title: PRES ( ) Delete  
Name: AMMAR, KAREN S  
Address: 1320 FUNSTON STREET  
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP ( ) Delete  
Name: BARNES, ELISSA  
Address: 1103 IVANHOE ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: TRE ( ) Delete  
Name: NASH, THOMAS J  
Address: 8723 NW 82ND STREET  
City-St-Zip: TAMARAC, FL 33321

Title: SEC ( ) Delete  
Name: SHELTON, JOHN  
Address: 6551 NE 20TH WAY  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CATHERINE COLAN MUTH

MGRM

01/09/2008

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