

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083068

FILED  
Jan 04, 2006  
Secretary of State

Entity Name: ORLANDO SCUBA CENTER, LLC

**Current Principal Place of Business:**

3471 SEMINOLE AVENUE  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

907 STATE ROAD 436  
CASSELBERRY, FL 32707 US

**Current Mailing Address:**

3471 SEMINOLE AVENUE  
OVIEDO, FL 32765 US

**New Mailing Address:**

907 STATE ROAD 436  
CASSELBERRY, FL 32707 US

FEI Number: 51-0552251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CALZADA & HAMNER, P.L.  
809 IRMA AVENUE  
3  
ORLANDO, FL 32803 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: MGR ( ) Delete  
Name: LINER, GAINES  
Address: 3471 SEMINOLE AVENUE  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LINER, GAINES I  
Address: 3471 SEMINOLE AVENUE  
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the 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: GAINES I. LINER

MNGR

01/04/2006

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