## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000046220

**Current Principal Place of Business:** 

Entity Name: TECHNICAL SCUBA TRAINING CENTER LLC

FILED Jul 08, 2008 Secretary of State

3746 SKIPPER ROAD 3901 KENILWORTH BLVD SEBRING, FL 33875 US SEBRING, FL 33870 US **Current Mailing Address: New Mailing Address:** 3746 SKIPPER ROAD 3901 KENILWORTH BLVD SEBRING, FL 33870 SEBRING, FL 33875 US FEI Number: 74-3214007 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EDMONSTON, BETH A 3744 SKIPPER ROAD SEBRING, FL 33875 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

**New Principal Place of Business:** 

SIGNATURE:

in the State of Florida.

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

RS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition Name: EDMONSTON, BETH A Name:

Address: 3744 SKIPPER ROAD Address: City-St-Zip: SEBRING, FL 33875 US City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 EDMONSTON, MICHEL A
 Name:

 Address:
 3744 SKIPPER ROAD
 Address:

 City-St-Zip:
 SEBRING, FL 33875 US
 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: BETH A EDMONSTON MGR 07/08/2008