

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000048498

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** ORLANDO TRAINING SOLUTIONS LLC

**Current Principal Place of Business:**

1218 NEEDLEWOOD LOOP  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

1218 NEEDLEWOOD LOOP  
OVIEDO, FL 32765 US

**New Mailing Address:**

**FEI Number:** 26-0160892

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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  
Name: RAWLS, CHARLES L JR.  
Address: 1218 NEEDLEWOOD LOOP  
City-St-Zip: OVIEDO, FL 32765 US

I hereby 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: DR. CHARLES L. RAWLS, JR.

MGRM

01/17/2012

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