

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000018976

**FILED**  
**Feb 04, 2011**  
**Secretary of State**

**Entity Name:** MOTIVATIONAL COACHING AND TRAINING SYSTEM, LLC

**Current Principal Place of Business:**

910 LAFAYETTE STREET  
JACKSONVILLE, FL 32234 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 194  
JACKSONVILLE, FL 32234 US

**New Mailing Address:**

PO BOX 1397  
ISLAMORADA, FL 33036 US

**FEI Number:** 26-2139571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GUNTER, ALMON W JR  
910 LAFAYETTE STREET  
JACKSONVILLE, FL 32234 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  
**Name:** GUNTER, ALMON W JR.  
**Address:** 910 LAFAYETTE STREET  
**City-St-Zip:** JACKSONVILLE, FL 32234 US

**Title:** MGRM  
**Name:** WRIGHT, JAYNE M  
**Address:** 178 SEBRING DRIVE  
**City-St-Zip:** TAVERNIER, FL 33070 US

**Title:** MGRM  
**Name:** BASS, REXFORD ERIC  
**Address:** 178 SEBRING DRIVE  
**City-St-Zip:** TAVERNIER, FL 33070 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:** JAYNE M WRIGHT

MGR

02/04/2011

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