

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000115078

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** SURBURBAN FIRE TRAINING, LLC

**Current Principal Place of Business:**

4349 CATAWBA DRIVE  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

**Current Mailing Address:**

4349 CATAWBA DRIVE  
GULF BREEZE, FL 32563

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

ISAKSON, WILBUR C  
4349 CATAWBA DRIVE  
GULF BREEZE, FL 32563 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: P  
Name: ISAKSON, WILBUR C  
Address: 4349 CATAWBA DRIVE  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: VP  
Name: ISAKSON, JESSICA L  
Address: 4349 CATAWBA DRIVE  
City-St-Zip: GULF BREEZE, FL 32563 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:** JESSICA L. ISAKSON

VP

04/29/2010

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