

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000035219

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** TRAINING ACQUISITION CONSORTIUM, LLC

**Current Principal Place of Business:**

6090 TERRY ROAD  
SUITE 401  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

6019 SCOTCHWOOD GLEN  
SUITE 204  
ORLANDO, FL 32822

**Current Mailing Address:**

6090 TERRY ROAD  
SUITE 401  
JACKSONVILLE, FL 32216

**New Mailing Address:**

6019 SCOTCHWOOD GLEN  
SUITE 204  
ORLANDO, FL 32822

**FEI Number:** 26-4660151

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BLACK, H LESTER III  
6090 TERRY ROAD  
SUITE 401  
JACKSONVILLE, FL 32216 US

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

BLACK, H LESTER III  
6019 SCOTCHWOOD GLEN  
SUITE 204  
ORLANDO, FL 32822 US

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:

04/22/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BLACK, H LESTER III  
Address: 6019 SCOTCHWOOD GLEN, SUITE 204  
City-St-Zip: ORLANDO, FL 32822

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: H LESTER BLACK III

MGR

04/22/2010

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