

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000114392

Entity Name: DNA TRAINING CAMP LLC

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

180 SOUTH YOUNG STREET  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

180 SOUTH YONGE STREET  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

PO BOX 10512  
DAYTONA BEACH, FL 321200512

**New Mailing Address:**

180 SOUTH YONGE STREET  
ORMOND BEACH, FL 32174

FEI Number: 01-0936116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SNELL LEGAL  
160 EAST GRANADA BOULEVARD  
ORMOND BEACH, FL 32176 US

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

ARNOLD KOLOZSVARI  
180 SOUTH YONGE ST  
ORMOND BEACH, FL 32174 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: ARNOLD KOLOZSVARI

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KOLOZSVARI, ARNOLD  
Address: 180 S YONGE ST  
City-St-Zip: ORMONAD BEACH, FL 32174 US

Title: MGR  
Name: LEGAULT, DANIEL R  
Address: 209 10TH STREET  
City-St-Zip: HOLLY HILL, FL 32117

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: ARNOLD KOLOZSVARI

PTNR

04/19/2011

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