# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Feb 10, 2012**
**Secretary of State**

DOCUMENT# L10000056803

**Entity Name:** COMMERCIAL DIVING ACADEMY OF JACKSONVILLE, LLC

**Current Principal Place of Business:**

8137-B N MAIN STREET
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

8137 N MAIN STREET
JACKSONVILLE, FL 32208

**Current Mailing Address:**

8137-B N MAIN STREET
JACKSONVILLE, FL 32208

**New Mailing Address:**

8137 N MAIN STREET
JACKSONVILLE, FL 32208

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

STONEBURNER, GRESHAM R
841 PRUDENTIAL DRIVE STE 1400
JACKSONVILLE, FL 32207 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: PRES
Name: LONNYE, BLACK R
Address: 8137 N. MAIN STREET
City-St-Zip: JACKSONVILLE, FL 32208

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 Statues.

SIGNATURE: LONNYE R BLACK PRES 02/10/2012

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