

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000058081

Entity Name: TVC ACADEMY, LLC

Current Principal Place of Business:

18900 N.E. 25 AVENUE
C/O MICHAEL-ANN RUSSELL JCC
NORTH MIAMI BEACH, FL 33180

Current Mailing Address:

18900 N.E. 25 AVENUE
C/O MICHAEL-ANN RUSSELL JCC
NORTH MIAMI BEACH, FL 33180 US

FEI Number: 45-2428118

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NELSON, BARRY A
2775 SUNNY ISLES BLVD
SUITE 118
NORTH MIAMI BEACH, FL 33160 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title C
Name BARNETT, DAVID
Address 2860 MARINA MILE BLVD
SUITE 105
City-State-Zip: FT LAUDERDALE FL 33312

Title TD
Name AIN, CLIFFORD B
Address 20764 WEST DIXIE HIGHWAY
City-State-Zip: AVENTURA FL 33180

Title S
Name DANIELS, LOUISE
Address 4460 SABAL PALM ROAD
City-State-Zip: MIAMI FL 33137

Title VC
Name YAVNER, MICHAEL S
Address 18909 NE 29TH AVENUE
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name NELSON, BARRY
Address 18900 NE 25TH AVE
C/O MICHAEL- ANN RUSSELL JCC
City-State-Zip: NORTH MIAMI BEACH FL 33180

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLIFFORD B AIN

TREASURER

01/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date