

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000013400

**Entity Name:** COLLEGE BOUND EDUCATIONAL SERVICES, LLC

**Current Principal Place of Business:**

10355 NW 6TH COURT  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

10355 NW 6TH COURT  
CORAL SPRINGS, FL 33071 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

SIMPSON, JOHN  
210 N UNIVERSITY DRIVE  
SUITE 100  
CORAL SPRINGS, FL 33071 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 MGRM  
Name THOMPSON, WINSTON  
Address 10355 NW 6TH COURT  
City-State-Zip: CORAL SPRINGS FL 33071

Title MGRM  
Name MCPHERSON, WADE  
Address 111 PRESTBURY LANE  
City-State-Zip: SOMERSET NJ 08873

*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: WINSTON THOMPSON**

**MGRM**

**04/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date