

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B01000000178

Entity Name: LEARNING SKILLS, LTD.

**FILED**  
**Feb 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

800 MAIN STREET, SUITE 3  
AMHERST, MA 01002

**New Principal Place of Business:**

**Current Mailing Address:**

10915 BONITA BEACH RD., STE 2144  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

FEI Number: 59-3674636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHWEIKHARDT, WILLIAM  
900 SIXTH AVENUE SOUTH, SUITE 203  
NAPLES, FL 34102 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

**GENERAL PARTNER INFORMATION:**

Document #:

Name: FLEISHNER, LEWIS  
Address: 800 MAIN ST., STE 3  
City-St-Zip: AMHERST, MA 01002

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: BRIGHAM, PETER  
Address: 10915 BONITA BEACH RD., SUITE 2144  
City-St-Zip: BONITA SPRINGS, FL 34135

Address:  
City-St-Zip:

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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: PETER B. BRIGHAM

PART

02/04/2010

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date