

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001209

Entity Name: DEVRY FLORIDA LLC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

ONE TOWER LANE, SUITE 1000
OAKBROOK TERRACE, IL 60181

New Principal Place of Business:

ONE TOWER LANE
SUITE 1000
OAKBROOK TERRACE, IL 60181

Current Mailing Address:

ONE TOWER LANE, SUITE 1000
OAKBROOK TERRACE, IL 60181

New Mailing Address:

FEI Number: 36-4355756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: HAMBURGER, DANIEL
Address: ONE TOWER LANE , SUITE 1000
City-St-Zip: OAKBROOK TERRACE, IL 60181

Title: PRES () Delete
Name: PAULDINE, DAVID
Address: ONE TOWER LANE, SUITE 1000
City-St-Zip: OAKBROOK TERRACE, IL 60181

Title: SEC () Delete
Name: DAVIS, GREGORY S
Address: ONE TOWER LANE, SUITE 1000
City-St-Zip: OAKBROOK TERRACE, IL 60181

Title: CFO () Delete
Name: GUNST, RICHARD M
Address: ONE TOWER LANE, SUITE 1000
City-St-Zip: OAKBROOK TERRACE, IL 60181

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RICHARD M. GUNST

CFO

04/23/2009

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