2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 AM
Secretary of State

DOCUMENT# L00000007023

Entity Name: THE KNOWLEDGE GUILD, LLC

Current Principal Place of Business:

818 NORTH HIGHWAY A1A, SUITE 301
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

818 NORTH HIGHWAY A1A, SUITE 301
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 59-3697914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAWFORD, JOHN R
225 WATER STREET, SUITE 900
JACKSONVILLE, FL 32202 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/MEMBERS:

Title:	MGR	( ) Delete
Name:	ENGMANN, RODOLFO F	
Address:	4339 BLUE HERON DRIVE	
City-St-Zip:	PONTE VEDRA BEACH, FL 32087	
Title:	MGR	(X) Delete
Name:	WILLIAMSON, BARBARA	
Address:	1320 STRAND AVE	
City-St-Zip:	NEPTUNE BEACH, FL 32266	
Title:	MGR	(X) Delete
Name:	THOENI, ANDREW	
Address:	3644 SARAH BROOKE COURT	
City-St-Zip:	JACKSONVILLE, FL 32277	

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:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RODOLFO F. ENGMANN MGR 02/28/2002

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