09/06/2002 10:12 407-426-7723 TUKDARIAN & UNC
Sep 06 02 07:04a Jill Kimball 407 8(

FILED
Sep 23, 2002 8:00 am
Secretary of State
09-23-2002 90195 021 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000016762

1. Entity Name
LEARNING CENTERS OF CENTRAL FLORIDA, LLC

Principal Place of Business
230 NORTH CASTLEFORD COURT
LONGWOOD FL 32779

Mailing Address
230 NORTH CASTLEFORD COURT
LONGWOOD FL 32779

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2402 Westminster Ct
Suite, Apt. #, etc.
City & State: Winter Park FL
Zip: 32789
Country: USA

3. Mailing Address
2402 Westminster Ct
Suite, Apt. #, etc.
City & State: Winter Park FL
Zip: 32789
Country: USA

4. FEI Number: 59-3749648
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
KIMBALL, NEAL
230 NORTH CASTLEFORD COURT
LONGWOOD FL 32779

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable): 2402 Westminster Ct
City: Winter Park FL Zip Code: 32789

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Neal Kimball Neal Kimball and Neal Kimball Date: Sept 20, 2002
Signature, Typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NUMBER FEE IS $50.00
Received Fee from Department of State
Date: September 20, 2002

9. MANAGING MEMBERS / MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KIMBALL, NEAL 230 NORTH CASTLEFORD COURT LONGWOOD FL 32779	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	2402 Westminster Ct Winter Park FL 32789	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Neal E Kimball 9/20/02 Phone # 407 869-4594
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #