

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020075

Entity Name: STAAB AND STAAB EDUCATION LLC

FILED  
Mar 17, 2004  
Secretary of State

**Current Principal Place of Business:**

13161 TANJA KING BLVD  
ORLANDO, FL 32828

**New Principal Place of Business:**

13461 TANJA KING BLVD  
ORLANDO, FL 32828

**Current Mailing Address:**

13161 TANJA KING BLVD  
ORLANDO, FL 32828

**New Mailing Address:**

13461 TANJA KING BLVD  
ORLANDO, FL 32828

FEI Number: 04-3670491

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STAAB, JOHN  
14024 CHICORA CROSSING BLVD  
ORLANDO, FL 32828 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: P ( ) Delete

Name: STAAB, JOHN

Address: 14024 CHICORA CROSSING BLVD

City-St-Zip: ORLANDO, FL 32828

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition

Name: STAAB, JOHN

Address: 14024 CHICORA CROSSING BLVD

City-St-Zip: ORLANDO, FL 32828

Title: V ( ) Delete

Name: STAAB, DEBORAH

Address: 14024 CHICORA CROSSING BLVD

City-St-Zip: ORLANDO, FL 32828

Title: MGRM (X) Change ( ) Addition

Name: STAAB, DEBORAH

Address: 14024 CHICORA CROSSING BLVD

City-St-Zip: ORLANDO, FL 32828

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 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: JOHN STAAB

MGR

03/17/2004

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