2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024345

Entity Name: TUTORINGZONE LC

FILED Jan 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

619 NE 1ST STREET 502 NE 8TH AVE

GAINESVILLE, FL 32601 GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

619 NE 1ST STREET 502 NE 8TH AVE

GAINESVILLE, FL 32601 GAINESVILLE, FL 32601

FEI Number: 54-2075079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HINTZE, MATTHEW 502 NE 8TH AVENUE

GAINESVILLE, FL 32601 US

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

() Delete MGRM Title: MGRM (X) Change () Addition

HINTZE, MATTHEW B HINTZE, MATTHEW B Name: Name: Address: 502 NE 8TH AVE Address: 502 NE 8TH AVE City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32601

(X) Change () Addition Title: MGRM () Delete Title: MGRM

Name: FIELDMAN, ETHAN Name: FIELDMAN, ETHAN Address: 2 FLATERNITY ROW Address: 1526 NW 7TH AVE City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32603

I hereby certify that the information supplied with this filing does not qualify for the 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: MATTHEW B. HINTZE **MGRM** 01/05/2006