

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000028624

FILED  
May 01, 2003  
Secretary of State

Entity Name: LEARNING CURVE CONSULTING, LLC

**Current Principal Place of Business:**

ROUTE 12 BOX 754  
LAKE CITY, FL 32025 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 129  
LAKE CITY, FL 32056 US

**New Mailing Address:**

FEI Number: 80-0060522      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STOVER, WILLIAM W JR  
ROUTE 12 BOX 754  
LAKE CITY, FL 32025 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: STOVER, WILLIAM W JR  
Address: RR 12 BOX 754  
City-St-Zip: LAKE CITY, FL 32025

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: WILLIAM W. STOVER JR      MGR      05/01/2003

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