

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000029

FILED  
Apr 24, 2005  
Secretary of State

**Entity Name:** NEXSTAGE TRAINING SOLUTIONS, LLC

**Current Principal Place of Business:**

8880 TERRENE COURT  
NAPLES, FL 34135 US

**New Principal Place of Business:**

2510 BERNWOOD DR.  
101  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

240 MULL AVE.  
AKRON, OH 44313 US

**New Mailing Address:**

FEI Number: 55-0837377      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SVOBODA, GORDON J II  
324 LAGOON AVENUE  
NAPLES, FL 34108 US

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

SVOBODA, GORDON J II  
503 ARBOR LAKE DR.  
NAPLES, FL 34110 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: GORDON J SVOBODA II

04/24/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: SVOBODA, GORDON J  
Address: 240 MULL AVENUE  
City-St-Zip: AKRON, OH 44313

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SVOBODA, GORDON J II  
Address: 240 MULL AVENUE  
City-St-Zip: AKRON, OH 44313

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: GORDON J SVOBODA II

MR.

04/24/2005

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