2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 12, 2004
Secretary of State

DOCUMENT# L03000002058

Entity Name: ALLIANT C-SPRINGS ACADEMY LLC

Current Principal Place of Business:

1705 NORTH 16TH STREET
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

1705 NORTH 16TH STREET
TAMPA, FL 33605

New Mailing Address:

FEI Number: 05-0550999 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOWLER WHITE BOGGS BANKER P.A.
ATTN; R. ALAN HIGBEE
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602 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: ALFONSO, CARLOS J
Address: 1705 N 16TH STREET
City-St-Zip: TAMPA, FL 33605

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: CARLOS J. ALFONSO MGR 07/12/2004

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