

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026588

FILED  
Jan 06, 2006  
Secretary of State

**Entity Name:** REACHING TOMORROW'S WORKFORCE, LLC

**Current Principal Place of Business:**

1452 NORTH KROME AVENUE  
SUITE 102 D  
FLORIDA CITY, FL 33034

**New Principal Place of Business:**

**Current Mailing Address:**

1452 NORTH KROME AVENUE  
SUITE 102 D  
FLORIDA CITY, FL 33034

**New Mailing Address:**

**FEI Number:** 81-0624153

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KHAJAVI, DONALD MR.  
Address: 1452 NORTH KROME AVENUE SUITE 102 D  
City-St-Zip: FLORIDA CITY, FL 33034

Title: MGRM ( ) Delete  
Name: TELESFORD, TSCHERINA MS.  
Address: 1452 NORTH KROME AVENUE SUITE 102 D  
City-St-Zip: FLORIDA CITY, FL 33034

Title: MGRM ( ) Delete  
Name: HAMMOND, TOM MR.  
Address: 1452 NORTH KROME AVENUE SUITE 102 D  
City-St-Zip: FLORIDA CITY, FL 33034

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: HAMMOND, THOMAS MR.  
Address: 1452 NORTH KROME AVENUE SUITE 102 D  
City-St-Zip: FLORIDA CITY, FL 33034

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: THOMAS HAMMOND

MGRM

01/06/2006

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