

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056768

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: FLORIDA TUTOR CENTER LLC

**Current Principal Place of Business:**

948 VIRGINIA STREET  
DUNEDIN, FL 34698 US

**New Principal Place of Business:**

**Current Mailing Address:**

948 VIRGINIA STREET  
DUNEDIN, FL 34698 US

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

SKULASON, HALLUR  
948 VIRGINIA STREET  
DUNEDIN, FL 34698 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: MGR ( ) Delete  
Name: SKULASON, HALLUR  
Address: 948 VIRGINIA STREET  
City-St-Zip: DUNEDIN, FL 34698 US

Title: MGRM ( ) Delete  
Name: KRISTOFERSDOTTIR, LILJA  
Address: 948 VIRGINIA STREET  
City-St-Zip: DUNEDIN, FL 34698 US

**ADDITIONS/CHANGES:**

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

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 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: HALLUR SKULASON

MGR

04/30/2004

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