

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000357

FILED
Jan 03, 2008
Secretary of State

Entity Name: ACADEMIC FINANCIAL SOLUTIONS, LLC

Current Principal Place of Business:

6700 LAKEVIEW CENTER DRIVE
SUITE 125
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

6700 LAKEVIEW CENTER DRIVE
SUITE 125
TAMPA, FL 33619 US

New Mailing Address:

FEI Number: 37-1481443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BABB, MICHAEL
5701 E. HILLSBOROUGH AVE., #2450
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

BABB, MICHAEL
6700 LAKEVIEW CENTER DRIVE
SUITE 125
TAMPA, FL 33619 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:

01/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BABB, MICHAEL
Address: 8505 GOLD FINCH CT.
City-St-Zip: TAMPA, FL 33647

Title: MGRM () Delete
Name: BABB, HAROLD
Address: 8505 GOLD FINCH CT.
City-St-Zip: TAMPA, FL 33647

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 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: RICH DISTLER

VPFI

01/03/2008

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