

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000023433

**FILED**  
**Jan 18, 2009**  
**Secretary of State**

**Entity Name:** BEGINNING YEARS LEARNING CENTER, LLC

**Current Principal Place of Business:**

15345 HARROWGATE WAY  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

301 WEST WELCH ROAD  
APOPKA, FL 32712

**Current Mailing Address:**

15345 HARROWGATE WAY  
WINTER GARDEN, FL 34787

**New Mailing Address:**

FEI Number: 43-2049282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BLESSNER, JENNIFER L MRS.  
15345 HARROWGATE WAY  
WINTER GARDEN, FL 34787 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: MGR ( ) Delete  
Name: BLESSNER, JENNIFER L MRS.  
Address: 15345 HARROWGATE WAY  
City-St-Zip: WINTER GARDEN, FL 34787

**ADDITIONS/CHANGES:**

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: JENNIFER BLESSNER

MGR

01/18/2009

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