

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000030421

FILED
Apr 18, 2005
Secretary of State

Entity Name: CORPORATE TRAINING EXPERTS, LLC

Current Principal Place of Business:

1321 HAWTHORNE COVE DRIVE
OCOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

1321 HAWTHORNE COVE DRIVE
OCOE, FL 34761

New Mailing Address:

FEI Number: 56-2454313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLMSTEAD, ANTHONY M
1321 HAWTHORNE COVE DRIVE
OCOE, FL 34761 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: MGRM () Delete
Name: OLMSTEAD, ANTHONY M
Address: 1321 HAWTHORNE COVE DRIVE
City-St-Zip: OCOE, FL 34761

Title: MGRM () Delete
Name: OLMSTEAD, MICHELE L
Address: 1321 HAWTHORNE COVE DRIVE
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: OLMSTEAD, KERI A
Address: 1321 HAWTHORNE COVE DRIVE
City-St-Zip: OCOE, FL 34761

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: ANTHONY M OLMSTEAD

MGRM

04/18/2005

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