

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032469

**FILED**  
**Jan 10, 2006**  
**Secretary of State**

**Entity Name:** SUCCESSFUL ACADEMICS OF STUART, LLC

**Current Principal Place of Business:**

955 CENTRAL PARKWAY  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

955 CENTRAL PARKWAY  
STUART, FL 34994

**New Mailing Address:**

4740 JORGENSEN RD  
FORT PIERCE, FL 34981

**FEI Number:** 20-2706577

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRECHBILL, MARK  
215 SOUTH FEDERAL HIGHWAY STE 100  
STUART, FL 34994 US

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

MEYER, MELINDA S  
4740 JORGENSEN RD  
FORT PIERCE, FL 34981 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:** MELINDA SUE MEYER

01/10/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** MEYER, MELINDA S  
**Address:** 955 CENTRAL PARKWAY  
**City-St-Zip:** STUART, FL 34994

**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 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:** MELINDA SUE MEYER

MGR

01/10/2006

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