

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000053578

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** TEACHING & LEARNING TECHNOLOGIES, LLC

**Current Principal Place of Business:**

8620 NW 13TH STREET  
#371  
GAINESVILLE, FL 32635

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 357713  
GAINESVILLE, FL 32635

**New Mailing Address:**

**FEI Number:** 20-2938909

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAYCUMBER, EVELYN M  
8620-371 N.W. 13TH STREET  
GAINESVILLE, FL 32653 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: MAYCUMBER, EVELYN M  
Address: 8620-371 N.W. 13TH STREET  
City-St-Zip: GAINESVILLE, FL 32653

Title: MGR ( ) Delete  
Name: WEATHERS, JEFFREY S PH.D.  
Address: 8620-371 N.W. 13TH STREET  
City-St-Zip: GAINESVILLE, FL 32653

**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: JEFFREY S. WEATHERS, PH.D.

MGR

04/14/2009

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