

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000067064

FILED
Dec 11, 2008
Secretary of State**Entity Name:** HUXTABLE EDUCATION GROUP, LLC**Current Principal Place of Business:**1225 W. BEAVER STREET
SUITE 123
JACKSONVILLE, FL 32204**New Principal Place of Business:****Current Mailing Address:**1225 W. BEAVER STREET
SUITE 123
JACKSONVILLE, FL 32204**New Mailing Address:****FEI Number:** 06-1751783**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HUXTABLE-MOUNT, GRACE R
268 NOBLE CIRCLE WEST
JACKSONVILLE, FL 32211 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:** MGRM () Delete
Name: HUXTABLE-MOUNT, GRACE R
Address: 268 NOBLE CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32211**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGRM () Change (X) Addition
Name: MOUNT, JASON C
Address: 268 NOBLE CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32211

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: GRACE R. HUXTABLE-MOUNT

MGRM

12/11/2008

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