

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067064

FILED
Mar 02, 2009
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 (X)

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: MGRM () Delete
Name: MOUNT, JASON C
Address: 268 NOBLE CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32211

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: GRACE R. HUXTABLE-MOUNT

MGRM

03/02/2009

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