

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
May 20, 2009  
Secretary of State**

DOCUMENT# L05000092312

Entity Name: QUANTUM LEAP EDUCATIONAL SERVICES, LLC

**Current Principal Place of Business:**

4221 BAYMEADOWS ROAD  
SUITE 7  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

3938 SUNBEAM ROAD  
SUITE 1  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

4221 BAYMEADOWS ROAD  
SUITE 7  
JACKSONVILLE, FL 32217

**New Mailing Address:**

3938 SUNBEAM ROAD  
SUITE 1  
JACKSONVILLE, FL 32257

FEI Number: 26-3886655      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ZENICK, LARRY S  
4221 BAYMEADOWS ROAD  
STE., 7  
JACKSONVILLE, FL 3221 US

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

ZENICK, LARRY S  
3938 SUNBEAM ROAD  
STE., 1  
JACKSONVILLE, FL 32257 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: LARRY S ZENICK      05/20/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ZENICK, LARRY  
Address: 4221 BAYMEADOWS ROAD STE., 7  
City-St-Zip: JACKSONVILLE, FL 32217

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ZENICK, LARRY  
Address: 3938 SUNBEAM ROAD, STE. 1  
City-St-Zip: JACKSONVILLE, FL 32257

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: LARRY S ZENICK      MR      05/20/2009  
\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date