

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 27, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L06000006320

1. Entity Name  
CALVARY CHRISTIAN PRE-SCHOOL, LLC



Principal Place of Business  
3190 HYPOLUXO ROAD  
BOYNTON BEACH, FL 33436

Mailing Address  
3190 HYPOLUXO ROAD  
BOYNTON BEACH, FL 33436



03132008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0759873

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MARSE, GEORGE L  
3190 HYPOLUXO ROAD  
BOYNTON BEACH, FL 33436

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U000000871315  
04/09/08 80125-011 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGR
NAME	MARSE, GEORGE L
STREET ADDRESS	4117 FLORAL DRIVE
CITY-ST-ZIP	BOYNTON BEACH, FL 33436
TITLE	MGR
NAME	MARSE, LORI
STREET ADDRESS	4117 FLORAL DRIVE
CITY-ST-ZIP	BOYNTON BEACH, FL 33436
TITLE	MGR
NAME	LICEA, ANA
STREET ADDRESS	3660 QUENTIN AVE
CITY-ST-ZIP	BOYNTON BEACH, FL 33426
TITLE	MGR
NAME	BYMASTER, TIMOTHY
STREET ADDRESS	5826 ITHACA CIRCLE
CITY-ST-ZIP	WEST LAKE WORTH, FL 33463
TITLE	MGR
NAME	ROSA, STEVE
STREET ADDRESS	17 PEPPERWOOD COURT
CITY-ST-ZIP	BOYNTON BEACH, FL 33426
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: \_\_\_\_\_

*G. Marse*

3/25/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #