2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000024084

City-St-Zip:

JACKSONVILLE, FL 32259 US

Entity Name: "A" WISE CHOICE - EDUCATION SOLUTIONS, LLC

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11250 RUSTIC PINES CIR W JACKSONVILLE, FL 32257 US **Current Mailing Address: New Mailing Address:** 11250 RUSTIC PINES CIR W JACKSONVILLE, FL 32257 US FEI Number: 20-4442545 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BREVALDO, JANICE C 11250 RUSŤIC PINES CIR W 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BREVALDO, JANICE C Name: Name: Address: 11250 RUSTIC PINES CIR W Address: City-St-Zip: JACKSONVILLE, FL 32257 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: NELSON, LORAINE P Name: Address: 6327 ORTEGA FARMS BLVD Address: City-St-Zip: JACKSONVILLE, FL 32244 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HIGHSMITH, DELENA L Name: Name: Address: 770 SWISS OAKS CT Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: JANICE C. BREVALDO MGRM 01/05/2007