

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034326

FILED
Apr 23, 2009
Secretary of State

Entity Name: BUSINESS SKILLS PRESS, LLC

Current Principal Place of Business:

381 W. TEMPLE COURT, S.W.
VERO BEACH, FL 32968

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 690656
VERO BEACH, FL 32969

New Mailing Address:

FEI Number: 20-4723197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, STEPHEN C ESQ.
202 N. HARBOR CITY BLVD., SUITE 300
MELBOURNE, FL 32935 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: BUTLER, THOMAS L
Address: P.O. BOX 690656
City-St-Zip: VERO BEACH, FL 32969

Title: MGRM () Delete
Name: BUTLER, MARGARET A
Address: P.O. BOX 690656
City-St-Zip: VERO BEACH, FL 32969

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: THOMAS L. BUTLER

MGRM

04/23/2009

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