

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046749

**FILED**  
**Apr 17, 2007**  
**Secretary of State**

**Entity Name:** SCHOOLS FINANCING CONSORTIUM, LLC

**Current Principal Place of Business:**

ATTN: FRANK SANDERLIN  
1051 WINDERLEY PLACE, SUITE 100  
MAITLAND, FL 32751

**New Principal Place of Business:**

ATTN: RUSS HAMLIN  
555 WINDERLEY PLACE, SUITE 400  
MAITLAND, FL 32751

**Current Mailing Address:**

ATTN: FRANK SANDERLIN  
1051 WINDERLEY PLACE, SUITE 100  
MAITLAND, FL 32751

**New Mailing Address:**

ATTN: RUSS HAMLIN  
555 WINDERLEY PLACE, SUITE 400  
MAITLAND, FL 32751

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

AMERICAN INFORMATION SERVICES, INC.  
420 SO. ORANGE AVENUE, SUITE 1200  
ORLANDO, FL 328013483 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR ( ) Change (X) Addition  
Name: SAATHOFF, DWIGHT  
Address: 2510 OAK ISLAND POINTE  
City-St-Zip: ORLANDO, FL 32809

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.

SIGNATURE: DWIGHT SAATHOFF MR 04/17/2007

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