## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000096583

Address:

City-St-Zip:

LAKE SAN MARCOS, CA 92078

FILED Jul 05, 2007 Secretary of State

Entity Name: THE CENTER FOR GUIDED MONTESSORI STUDIES, LLC **New Principal Place of Business: Current Principal Place of Business:** 2400 MIGUEL BAY TERRA CEIA, FL 34250 **Current Mailing Address: New Mailing Address:** 2400 MIGUEL BAY DRIVE 2400 MIGUEL BAY TERRA CEIA, FL 34250 PO BOX 130 TERRA CEIA, FL 34250 FEI Number: 20-8286641 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SELDIN, TIMOTHY SELDIN, TIMOTHY MGRM 2400 MIGUEL BAY 2400 MIGUEL BAY DRIVE TERRA CEIA, FL 34250 US US TERRA CEIA, FL 34250 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: TIMOTHY D SELDIN 07/05/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SELDIN, TIMOTHY Name: Name: Address: 2400 MIGUEL BAY Address: City-St-Zip: TERRA CEIA, FL 34250 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SELDIN, MARC Name: Address: 8587 HARVEST VIEW CT. Address: City-St-Zip: ELLICOTT CITY, MD 21043 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WOLFF, JONATHAN Name: Name: 1242 RUE STREET MORITZ

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.

Address:

City-St-Zip:

SIGNATURE: TIMOTHY D SELDIN **MGRM** 07/05/2007