

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106352

FILED  
Jan 29, 2008  
Secretary of State

Entity Name: EDUCATIONAL GROUP, LLC.

## Current Principal Place of Business:

1082 SW KEATS AVE  
PALM CITY, FL 34990 US

## New Principal Place of Business:

## Current Mailing Address:

1082 SW KEATS AVE  
PALM CITY, FL 34990 US

## New Mailing Address:

FEI Number: 20-5827574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REAL ASSET MANAGEMENT, LLC.  
901 SW MARTIN DOWNS BLVD #321  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

HAYNES, TERESA G  
1082 SW KEATS AVE  
PALM CITY, FL 34990 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: T G HAYNES

01/29/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: HAYNES, WILLIAM  
Address: 1082 SW KEATS AVE  
City-St-Zip: PALM CITY, FL 34990 US

Title: MGRM (X) Delete  
Name: HAYNES, TERESA  
Address: 1082 SW KEATS AVE  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: TERESA, HAYNES G  
Address: 1082 SW KEATS AVE  
City-St-Zip: PALM CITY, FL 34990 US

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: TERESA G HAYNES

MGRM

01/29/2008

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