

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049497

FILED
Jan 21, 2009
Secretary of State

Entity Name: GARDEN MONTESSORI SCHOOL, LLC.

Current Principal Place of Business:

6845 BOYETTE RD
WESLEY CHAPEL, FL 33546

New Principal Place of Business:

6845 BOYETTE RD
WESLEY CHAPEL, FL 33545

Current Mailing Address:

7812 N CLARK AVE
TAMPA, FL 33614

New Mailing Address:

6845 BOYETTE RD
WESLEY CHAPEL, FL 33545

FEI Number: 20-8998685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTIERREZ, PATRICIA A
7812 N CLARK AVE
TAMPA, FL 33614 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: MGR () Delete
Name: GUTIERREZ, PATRICIA A
Address: 7812 N CLARK AVE
City-St-Zip: TAMPA, FL 33614

Title: MGR () Delete
Name: FLORES, SONIA
Address: 7812 N CLARK AVE
City-St-Zip: TAMPA, FL 33614

Title: MGR (X) Delete
Name: CAMPUZANO, JAIME A
Address: 7812 N CLARK AVE
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: RUSKIN, STEFANI
Address: 3044 FOX RIDGE BLVD
City-St-Zip: WESLEY CHAPEL, FL 33543

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: STEFANI RUSKIN

MGR

01/21/2009

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