

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000074029

FILED
Feb 15, 2008
Secretary of State

Entity Name: SUMTER SPEECH AND LANGUAGE THERAPY CENTER, PL

Current Principal Place of Business:

218 N. FLORIDA STREET, STE. 3
BUSHNELL, FL 33513 US

New Principal Place of Business:

Current Mailing Address:

218 N. FLORIDA STREET, STE. 3
BUSHNELL, FL 33513 US

New Mailing Address:

FEI Number: 26-0553708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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: J. BERRY, SHANNON L
Address: 218 N. FLORIDA STREET, STE. 3
City-St-Zip: BUSHNELL, FL 33513 US

Title: MGRM () Delete
Name: BERRY, CHRISTOPHER W
Address: 218 N. FLORIDA STREET, STE. 3
City-St-Zip: BUSHNELL, FL 33513 US

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: SHANNON L. J. BERRY

MRGM

02/15/2008

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