

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076887

FILED  
Apr 09, 2009  
Secretary of State

**Entity Name:** REMILLARD SCHOOL OF PAINO, LLC

**Current Principal Place of Business:**

116 S MAGNOLIA AVENUE, SUITE #2  
OCALA, FL 34474

**New Principal Place of Business:**

108 N MAGNOLIA AVENUE  
SUITE 217  
OCALA, FL 34474

**Current Mailing Address:**

5916 NW 27TH PLACE  
OCALA, FL 34482

**New Mailing Address:**

**FEI Number:** 39-2060109

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REMILLARD, CHARLES  
5916 NW 27TH PLACE  
OCALA, FL 34482 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: REMILLARD, CHARLES  
Address: 5916 NW 27TH PLACE  
City-St-Zip: OCALA, FL 34482

Title: MGRM ( ) Delete  
Name: REMILLARD, SUSAN  
Address: 5916 NW 27TH PLACE  
City-St-Zip: OCALA, FL 34482

**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: SUSAN C REMILLARD

MRS

04/09/2009

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