

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082085

FILED
May 12, 2009
Secretary of State

Entity Name: ACADEMIC BEGINNINGS CHILDCARE LLC

Current Principal Place of Business:

315 S MAPLE AVE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

315 S MAPLE AVE
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 26-0733612 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:

BARNES, KIM S
602 ANHINGA RD
WINTER SPRINGS, FL 32708 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BARNES, KIM S
Address: 602 ANHINGA RD
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: MGRM () Delete
Name: BARNES, JERRY N
Address: 602 ANHINGA RD
City-St-Zip: WINTER SPRINGS, FL 32708

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: KIM BARNES

MNGR

05/12/2009

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