

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084926

FILED  
Jan 07, 2008  
Secretary of State

**Entity Name:** DIRECT ACTION LEARNING ADVANTAGE LLC

**Current Principal Place of Business:**

1190 LAGUNA CIRCLE  
SAINT CLOUD, FL 347719485

**New Principal Place of Business:**

1190 LAGUNA CIRCLE  
SAINT CLOUD, FL 347719485 US

**Current Mailing Address:**

1190 LAGUNA CIRCLE  
SAINT CLOUD, FL 347719485

**New Mailing Address:**

1190 LAGUNA CIRCLE  
SAINT CLOUD, FL 347719485 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

BECKER, JUDITH A  
1190 LAGUNA CIRCLE  
SAINT CLOUD, FL 347719485 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: BECKER, JUDITH A  
Address: 1190 LAGUNA CIRCLE  
City-St-Zip: SAINT CLOUD, FL 347719485

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BECKER, JUDITH A  
Address: 1190 LAGUNA CIRCLE  
City-St-Zip: SAINT CLOUD, FL 347719485 US

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: JUDITH A. BECKER

MGRM

01/07/2008

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