

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124556

FILED  
Jun 22, 2008  
Secretary of State

Entity Name: MONTESSORI ACADEMY 2007 YEARBOOK COMMITTEE LLC

**Current Principal Place of Business:**

19200 PINES BOULEVARD  
PEMBROKE PINES, FL 33029 US

**New Principal Place of Business:**

**Current Mailing Address:**

19200 PINES BOULEVARD  
PEMBROKE PINES, FL 33029 US

**New Mailing Address:**

FEI Number: 61-1549744 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:**

MAURI, DIANE  
13502 NW 6TH STREET  
PEMBROKE PINES, FL 33028 US

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

PADRON, FLAVIA  
19200 PINES BOULEVARD  
PEMBROKE PINES, FL 33029 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: FLAVIA PADRON

06/22/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VALLADOR, MADELEINE  
Address: 19200 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM ( ) Delete  
Name: LANE, LISA  
Address: 19200 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM (X) Delete  
Name: RIVERA, DELMARIS  
Address: 19200 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM (X) Delete  
Name: PADRON, FLAVIA  
Address: 19200 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM (X) Delete  
Name: KRZYZANOWSKI, CLAUDIA  
Address: 19200 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PADRON, FLAVIA  
Address: 19200 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM (X) Change ( ) Addition  
Name: KRZYZANOWSKI, CLAUDIA  
Address: 19200 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029 US

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

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: FLAVIA PADRON

MGRM

06/22/2008

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