

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000046045

FILED
Apr 15, 2009
Secretary of State

Entity Name: HOUSING EDUCATION ASSOCIATES, LLC

Current Principal Place of Business:

5912 HATTERAS PLAM WAY
TAMPA, FL 33615

New Principal Place of Business:

5912 HATTERAS PALM WAY
TAMPA, FL 33615

Current Mailing Address:

5912 HATTERAS PLAM WAY
TAMPA, FL 33615

New Mailing Address:

5912 HATTERAS PALM WAY
TAMPA, FL 33615

FEI Number: 26-2589021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SYLVIA A., ALVAREZ
550 N. REO ST.
SUITE 300
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

SYLVIA A., ALVAREZ
5912 HATTERAS PALM WAY
TAMPA, FL 33615 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: SYLVIA A ALVAREZ

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALVAREZ, SYLVIA A
Address: 5912 HATTERAS PALM WAY
City-St-Zip: TAMPA, FL 33615

Title: MGR () Delete
Name: WALKER, WALTER JR.
Address: 1536 BAKER RD.
City-St-Zip: LUTZ, FL 33559

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: SYLVIA A. ALVAREZ

MGR

04/15/2009

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