

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000065205

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Entity Name:** PATHWAYS EDUCATIONAL AND ACADEMIC CONSULTING, LLC

**Current Principal Place of Business:**

1025 W. NEW YORK AVE. SUITE 2  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

1025 W. NEW YORK AVE. SUITE 2  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 94-3454101

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KNOWLES, LINDA E M.S.  
1025 W. NEW YORK AVE. SUITE 2  
DELAND, FL 32720 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  
Name: KNOWLES, LINDA E M.S.  
Address: 1025 W. NEW YORK AVE. SUITE 2  
City-St-Zip: DELAND, FL 32720

I hereby 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: LINDA E. KNOWLES, M.S.

MGR

04/13/2010

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