

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069935

FILED  
Sep 02, 2009  
Secretary of State

Entity Name: THE COLLEGE CONSULTANTS, L.L.C

**Current Principal Place of Business:**

1135 NW 88TH STREET  
MIAMI, FL 331502545 US

**New Principal Place of Business:**

**Current Mailing Address:**

1135 NW 88TH STREET  
MIAMI, FL 331502545 US

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BENITEZ, YOLANDA A  
6240 NW 173RD STREET  
1036  
HIALEAH, FL 33015 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 ( ) Delete  
Name: RUSSELL, EUGENIA M  
Address: 1135 NW 88TH STREET  
City-St-Zip: MIAMI, FL 33150 US

Title: MGR ( ) Delete  
Name: BENITEZ, YOLANDA A  
Address: 6240 NW 173RD STREET, APT #1036  
City-St-Zip: MIAMI, FL 33015 US

Title: MGR ( ) Delete  
Name: HEADLEY, LATANYA  
Address: 365 NE 125TH STREET, APT # 216  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: MGR ( ) Delete  
Name: RUSSELL, MICHAEL  
Address: 1135 NW 88TH STREET  
City-St-Zip: MIAMI, FL 33150 US

Title: MGR (X) Delete  
Name: PAREMORE, SHIRLEY  
Address: 1135 NW 88TH STREET  
City-St-Zip: MIAMI, FL 33150 US

**ADDITIONS/CHANGES:**

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

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

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: EUGENIA M. RUSSELL

MRS.

09/02/2009

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