

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000073092

**FILED**  
**Jan 12, 2009**  
**Secretary of State**

**Entity Name:** LEARNING FOUNDATIONS REAL ESTATE LLC

**Current Principal Place of Business:**

HIGHLAND PARK PHASE 2A-1 TRACT E  
TAMPA, FL 33626

**New Principal Place of Business:**

14607 BRICK PLACE  
TAMPA, FL 33626

**Current Mailing Address:**

PO BOX 320938  
TAMPA, FL 33679

**New Mailing Address:**

**FEI Number:** 26-2778036

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKEL, CHRISTOPHER L  
1604 CULBREATH ISLES DR  
TAMPA, FL 33629 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: FRANKEL, CHRISTOPHER L  
Address: PO BOX 320938  
City-St-Zip: TAMPA, FL 33679

Title: MGRM ( ) Delete  
Name: FRANKEL, LORRI M  
Address: PO BOX 320938  
City-St-Zip: TAMPA, FL 33679

**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: LORRI M FRANKEL

MGRM

01/12/2009

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