

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000094615

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** K SQUARED EDUCATIONAL SERVICES, LLC

**Current Principal Place of Business:**

4137 N.W. 32ND STREET  
GAINESVILLE, FL 32605 US

**New Principal Place of Business:**

2411 NW 41ST STREET  
GAINESVILLE, FL 32605 US

**Current Mailing Address:**

4137 N.W. 32ND STREET  
GAINESVILLE, FL 32605 US

**New Mailing Address:**

4137 N.W. 32ND STREET  
GAINESVILLE, FL 32606- US

**FEI Number:** 26-3535228

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FREY, KRISTA L  
2330 N.W. 116TH PLACE  
GAINESVILLE, FL 32609 US

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

FREY, KRISTA L  
2411 NW 41ST STREET  
GAINESVILLE, FL 32609 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: KRISTA FREY

04/21/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO  
Name: BIRDSEY, KRISTIN D  
Address: 2411 NW 41ST ST  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: COO  
Name: FREY, KRISTA L  
Address: 2411 NW 41ST ST  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: T  
Name: RUBIN, SUSAN  
Address: 2411 NW 41ST ST  
City-St-Zip: GAINESVILLE, FL 32606

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: KRISTIN BIRDSEY

CEO

04/21/2010

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