

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000114893

**FILED**  
**Jul 07, 2011**  
**Secretary of State**

**Entity Name:** CPE SCHOOL, LLC

**Current Principal Place of Business:**

1911 NORTH U.S. HWY. 301  
SUITE 140  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

1911 NORTH U.S. HWY. 301  
SUITE 140  
TAMPA, FL 33619 US

**New Mailing Address:**

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

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

FINGER, DEREK A MGR  
1911 NORTH U.S. HWY. 301  
SUITE 140  
TAMPA, FL 33619 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: FINGER, DEREK A  
Address: 5956 JAEGERGLEN DRIVE  
City-St-Zip: LITHIA, FL 33547 US

Title: MGR  
Name: GUIDO, HEATH C  
Address: 2316 DOVEWOOD ESTATES CT.  
City-St-Zip: VALRICO, FL 33594 US

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: DEREK FINGER

MGRM

07/07/2011

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