

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000019711

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** LITTLE LEARNERS ACADEMY, LLC.

**Current Principal Place of Business:**

6612 FAIRMONT STREET  
NAVARRE, FL 32566

**New Principal Place of Business:**

8754 ORTEGA PARK DRIVE  
NAVARRE, FL 32566

**Current Mailing Address:**

6612 FAIRMONT STREET  
NAVARRE, FL 32566

**New Mailing Address:**

**FEI Number:** 27-2020915      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MCCLUSKY, PATRICIA  
6612 FAIRMONT STREET  
NAVARRE, FL 32566      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:** MCCLUSKY, PATRICIA  
**Address:** 6612 FAIRMONT STREET  
**City-St-Zip:** NAVARRE, FL 32566

**Title:** MGR  
**Name:** MCCLUSKY, JOHN  
**Address:** 6612 FAIRMONT STREET  
**City-St-Zip:** NAVARRE, FL 32566

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:** PATRICIA MCCLUSKY

MGR

04/28/2011

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