

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000095851

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Entity Name:** SOUTH EASTERN WELDING SCHOOL, L.L.C

**Current Principal Place of Business:**

12535 WAGES WAY EAST  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

6973 HIGHWAY AVENUE  
UNIT 107  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

12535 WAGES WAY EAST  
JACKSONVILLE, FL 32218

**New Mailing Address:**

6973 HIGHWAY AVENUE  
UNIT 107  
JACKSONVILLE, FL 32254

**FEI Number:** 90-0647749

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURKS, ROLLINS  
12535 WAGES WAY EAST  
JACKSONVILLE, FL 32218 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:** BURKS, ROLLINS  
**Address:** 12535 WAGES WAY EAST  
**City-St-Zip:** JACKSONVILLE, FL 32218

**Title:** MGRM  
**Name:** BURKS, KATINA  
**Address:** 12535 WAGES WAY EAST  
**City-St-Zip:** JACKSONVILLE, FL 32218

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:** ROLLINS BURKS

MGR

04/11/2011

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