

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000018359

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Entity Name:** AFTER THE BELL TUTORING, LLC

**Current Principal Place of Business:**

445 N. CLEVELAND AVE.  
FORT MEADE, FL 33841

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 595  
FORT MEADE, FL 33841

**New Mailing Address:**

**FEI Number:** 27-4939358

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SPRADLIN, MARLA W  
445 N. CLEVELAND AVE.  
FORT MEADE, FL 33841 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:** SPRADLIN, MARLA W  
**Address:** 445 N. CLEVELAND AVE.  
**City-St-Zip:** FORT MEADE, FL 33841

**Title:** MGR  
**Name:** BAINE, CYNTHIA W  
**Address:** 615 NE 4TH STREET  
**City-St-Zip:** FORT MEADE, FL 33841

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:** MARLA W SPRADLIN

MGR

03/05/2012

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