

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000031381

FILED  
Mar 26, 2012  
Secretary of State

**Entity Name:** NEW HORIZONS LEARNING CENTER, LLC

**Current Principal Place of Business:**

1513 CARTER OAKS DR.  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

1513 CARTER OAKS DR.  
VALRICO, FL 33594

**New Mailing Address:**

FEI Number: 90-0661637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MONPEROUSSE, JOCELYNE C  
1513 CARTER OAKS DR.  
VALRICO, FL 33594 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: MGRM  
Name: MONPEROUSSE, JOCELYNE C  
Address: 1513 CARTER OAKS DR.  
City-St-Zip: VALRICO, FL 33594

Title: MGRM  
Name: SOUVENIR, MICHELE  
Address: 2316 COLUSA LANE  
City-St-Zip: VALRICO, FL 33594

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: JOCELYNE MONPEROUSSE

MGRM

03/26/2012

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