

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000001783

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** TUTOR TIME LEARNING CENTERS, LLC

**Current Principal Place of Business:**

21333 HAGGERTY ROAD  
SUITE 300  
NOVI, MI 48357

**New Principal Place of Business:**

**Current Mailing Address:**

21333 HAGGERTY ROAD  
SUITE 300  
NOVI, MI 48357

**New Mailing Address:**

**FEI Number:** 36-4500741

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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:** CHILDTIME CHILDCARE, INC  
**Address:** 21333 HAGGERTY RD, STE 300  
**City-St-Zip:** NOVI, MI 48375

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: IRA L. YOUNG

AUTH

04/20/2011

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