

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001153

FILED
Apr 29, 2008
Secretary of State

Entity Name: NBP SCHOOLS, LLC

Current Principal Place of Business:

3000 WEST CYPRESS CREEK RD
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

3000 WEST CYPRESS CREEK RD
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 20-2418651

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: MGR () Delete
Name: TASLITZ, STEVEN
Address: 1600 WEST COMMERCIAL BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 333093012

Title: MGR (X) Delete
Name: BECKER, DOUG
Address: 100 FLEET ST
City-St-Zip: BALTIMORE, MD 21202

Title: MGR (X) Delete
Name: MORGAMAN, PHILIP
Address: 1600 WEST COMMERCIAL BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 333093012

Title: MGR (X) Delete
Name: STEPHENSON, MARK
Address: 1600 WEST COMMERCIAL BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 333093012

Title: MGR (X) Delete
Name: ARRECHEA, JAVIER
Address: TORRES PLATINO TA-HB PASCEODE TAMARINDAS
City-St-Zip: MEXICO DF MEXICO, 11700

Title: MGR (X) Delete
Name: COHEN, NEAL
Address: 3275 ROBINSON BAY RD
City-St-Zip: DEEPHAVEN, MN 55391

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MERITAS LLC,
Address: 3000 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: STACY L. GORDON

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04/29/2008

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