

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000108170

**FILED**  
**Apr 26, 2016**  
**Secretary of State**  
**CC7732934881**

**Entity Name:** SOUTHEASTERN EDUCATIONAL & TECHNICAL INSTITUTE, LLC

**Current Principal Place of Business:**

5922 CATTLEMEN LANE  
STE 201  
SARASOTA, FL 34232

**Current Mailing Address:**

5922 CATTLEMEN LANE  
STE 201  
SARASOTA, FL 34232

**FEI Number:** 20-4034117

**Certificate of Status Desired:** No

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

SWEENEY, THOMAS MPRESIDE  
5922 CATTLEMEN LANE  
#201  
SARASOTA, FL 34232 US

*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

**Authorized Person(s) Detail :**

Title            MGRM  
Name            SWEENEY, THOMAS MII  
Address        9180 SWAYING BRANCH RD  
City-State-Zip: SARASOTA FL 34241

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS M SWEENEY

**MGRM**

**04/26/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date