

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000164310

**Entity Name:** EXCEPTIONAL EDUCATION DATA SOLUTIONS, LLC

**Current Principal Place of Business:**

5066 SW ICHETUCKNEE AVENUE  
FORT WHITE, FL 32038

**Current Mailing Address:**

5066 SW ICHETUCKNEE AVENUE  
FORT WHITE, FL 32038

**FEI Number: 80-0964075**

**Certificate of Status Desired: No**

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

BEGGS & LANE, RLLP  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32503 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	MGR	Title	MGR
Name	SESSIONS, CHRISTI	Name	SESSIONS, ELAINE
Address	5066 SW ICHETUCKNEE AVENUE	Address	7001 TRAMMEL DRIVE
City-State-Zip:	FORT WHITE FL 32038	City-State-Zip:	MILTON FL 32570

*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: ELAINE L SESSIONS**

**PARTNER**

**03/24/2014**

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

\_\_\_\_\_  
Date