

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000459229

**Entity Name:** BEACON TUTORING LLC

**Current Principal Place of Business:**

12501 WORLD PLAZA LN  
BLDG 51  
FORT MYERS, FL 33907

**Current Mailing Address:**

12501 WORLD PLAZA LN  
BLDG 51  
FORT MYERS, FL 33907 US

**FEI Number:** 93-3837381

**Certificate of Status Desired:** No

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

BEACON HOLDING LLC  
2807 SW 29TH PL  
CAPE CORAL, FL 33914 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  
Name BEACON HOLDING LLC  
Address 2807 SW 29TH PL  
City-State-Zip: CAPE CORAL FL 33914

Title AMBR  
Name EDGE, NICOLE P MRS  
Address 2807 SW 29TH PL  
City-State-Zip: CAPE CORAL FL 33914

Title AMBR  
Name EDGE, TIMOTHY W MR  
Address 2807 SW 29TH PL  
City-State-Zip: CAPE CORAL FL 33914

*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:** NICOLE EDGE

**OWNER**

**02/06/2025**

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

\_\_\_\_\_ Date