## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000686

Entity Name: THE SAGEMONT SCHOOL, L.C.

**Current Principal Place of Business:** 

3500 GATEWAY DRIVE

SUITE #201

POMPANO BEACH, FL 33326

**Current Mailing Address:** 

3500 GATEWAY DRIVE

**SUITE #201** 

POMPANO BEACH, FL 33326 US

FEI Number: 65-0607202 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FINEBERG, LIBO BESQ 3500 GATEWAY DRIVE STE 201

POMPANO BEACH, FL 33069 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:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MGRM** Title **MGRM** 

Name SAGEMONT, CORP. Name GOLDMAN, RICHARD M

3500 GATEWAY DR., #201,C/O LIBO 3500 GATEWAY DRIVE Address Address **SUITE #201** 

**FINEBERG** 

City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33326

Title MGRM Title **MGRM** 

Name GOLDMAN, RENEE K Name FINEBERG, LIBO B

Address 3500 GATEWAY DRIVE Address 3500 GATEWAY DRIVE, SUITE 201

**SUITE #201** City-State-Zip: POMPANO BEACH FL 33069

City-State-Zip: POMPANO BEACH FL 33326

Title MGR Title MGRM

Name FORTICH-LUTZ. MERCEDES E GOLDMAN, BRENT O Name

Address 3500 GATEWAY DRIVE 3500 GATEWAY DRIVE Address

**SUITE #201 SUITE #201** 

POMPANO BEACH FL 33326 City-State-Zip: City-State-Zip: POMPANO BEACH FL 33326

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MERCEDES E. FORTICH-LUTZ

**MGR** 

04/17/2013

**FILED** Apr 17, 2013

**Secretary of State** 

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