2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L01000011885

Entity Name: ANDERSONTHORNTON CONSULTANTS, L.L.C.

Current Principal Place of Business:

15429 N. FLORIDA AVE. TAMPA, FL 33613

Current Mailing Address:

15429 N. FLORIDA AVE. TAMPA, FL 33613 US

FEI Number: 59-3731848

Name and Address of Current Registered Agent:

IHRIG, WILLIAM K 101 EAST KENNEDY BLVD. SUITE 2800 TAMPA, FL 33602 US Certificate of Status Desired: Yes

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

Authorized Person(s) Detail :

| Title | MGRM | Title | MGRM |
|-----------------|---|-----------------|--------------------------|
| Name | THORNTON, GEORGE P | Name | ANDERSON, SARAH |
| Address | 4110 WHITTER DRIVE | Address | 1210 ANOLAS WAY |
| City-State-Zip: | LAND O LAKES FL 34639 | City-State-Zip: | LUTZ FL 33548 |
| | | | |
| | | | |
| Title | MGRM | Title | MGRM |
| Title Name | MGRM THORNTON, GEORGE PJR. | Title Name | MGRM THORNTON, ELLA J |
| | | | |
| Name | THORNTON, GEORGE PJR. 10522 SAN TRAVASO DR | Name | THORNTON, ELLA J |

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.

MGRM

Date

Electronic Signature of Signing Authorized Person(s) Detail