

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000273710

**Entity Name:** CONSUMER CONSULTING GROUP LLC

**Current Principal Place of Business:**

801 N MAGNOLIA AVE, SUITE 106  
ORLANDO, FL 32803

**Current Mailing Address:**

801 N MAGNOLIA AVE, SUITE 106  
ORLANDO, FL 32803 US

**FEI Number: 84-3971379**

**Certificate of Status Desired: Yes**

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

ANDERSON, MARK  
801 N MAGNOLIA AVE, SUITE 106  
ORLANDO, FL 32803 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 ANDERSON, MARK J  
Address 801 N MAGNOLIA AVE, SUITE 106  
City-State-Zip: ORLANDO FL 32803

Title AMGR  
Name MUNSCH, SALLY K  
Address 801 N MAGNOLIA AVE  
STE 106  
City-State-Zip: ORLANDO FL 32803

*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: MARK ANDERSON**

**MGR**

**01/12/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date