

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000048434

Entity Name: JW CONSULTANT LLC**Current Principal Place of Business:**1136 OKURA ST
MOORE HAVEN, FL 33471**Current Mailing Address:**1136 OKURA ST
MOORE HAVEN, FL 33471 US**FEI Number:** 86-2119191**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WATSON, GERALD G JR
1136 OKURA ST.
MOORE HAVEN, FL 33471 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	WATSON, LISA T
Address	1136 OKURA ST
City-State-Zip:	MOORE HAVEN FL 33471

Title	OWNER, MGR
Name	WATSON , GERALD G JR.
Address	1136 OKURA ST
City-State-Zip:	MOORE HAVEN FL 33471

Title	MGR
Name	WATSON, JASON
Address	6020 LINDBROOK AVE
City-State-Zip:	FT MYERS FL 33905

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: GERALD WATSON JR

OWNER

03/29/2024

Electronic Signature of Signing Authorized Person(s) Detail_____
Date