

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000014928

FILED
Aug 02, 2002
Secretary of State

Entity Name: OTH CONSULTANTS, LLC

Current Principal Place of Business:

10068 ROMAINE CIRCLE SOUTH
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

10068 ROMAINE CIRCLE SOUTH
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3752618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
103 NORTH MERIDIAN
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: HEIL, PHILIP PRES
Address: 10068 ROMAINE CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: MGRM () Change (X) Addition
Name: SAMBAMURTHI, MUNIPALLI VP
Address: 4069 SABEL DRIVE
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: MGRM () Change (X) Addition
Name: CORBIN, RANDALL SEC
Address: POST OFFICE BOX 550988
City-St-Zip: JACKSONVILLE, FL 32255 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: RANDALL CORBIN

MGRM

08/02/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date