2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000020182

1. Entity Name

JRM CONSULTING, L.L.C.



FILED Mar 17, 2006 08:00 AM Secretary of State

Principal Place of Business

9741 WILSHIRE LAKES BLVD. NAPLES, FL 34109 Mailing Address

9741 WILSHIRE LAKES BLVD. NAPLES, FL 34109



03032006 Na Chg-LLC

CR2E083 (11/05)

4. F£I Number 01-0552836 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JOHNSON, KENNETH R 4001 TAMIAMI TRAIL NORTH, STE. 300 NAPLES, FL 34103

DO NOT WRITE IN THIS SPACE

8.	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. I am familiar with, and accept
	the obligations of registered agent.

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when remembring)

DATE

Filing Fee Is \$50.00 Due by May 1, 2006

Ð.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZP	MGR MANGAN, JEFFREY R 9741 WILSHIRE LAKES BLVD. NAPLES, FL 34109
TITLE NAME STREET AUDRESS CXTY-ST-ZIP	
TITLE NAME STREET ADDRESS OTTY-ST-ZIP	
TITLE Name Street address City-St-Zep	
ICTLE NAME STREET ADDRESS CXTY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000471391 03/28/06-00052-013 55.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am a managing member or manager of the limited flability company at the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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