2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# L02000001521

Entity Name: GOVERNMENTAL & BUSINESS CONSULTING, LLC

Current Principal Place of Business:

216 SUMMERWOOD TRAIL
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

216 SUMMERWOOD TRAIL
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 80-0032579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STELLING, JAMES H III
216 SUMMERWOOD TRAIL
MAITLAND, FL 32751 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/MANAGERS:

Title: MGR ( ) Delete
Name: STELLING, JAMES H III
Address: 216 SUMMERWOOD TRAIL
City-St-Zip: MAITLAND, FL 32751 US

Title: MGR ( ) Delete
Name: DORWORTH, CHRISTOPHER E
Address: 697 OAK HOLLOW WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: DORWORTH, CHRISTOPHER E
Address: 1540 WHITSTABLE COURT
City-St-Zip: LAKE MARY, FL 32746 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JAMES H. STELLING, III MGR 05/01/2006

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