

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002213

Entity Name: GMX CONSULTING, LLC

FILED  
Apr 22, 2005  
Secretary of State

## Current Principal Place of Business:

4230 WINDING WILLOW DR.  
TAMPA, FL 33624

## New Principal Place of Business:

4230 WINDING WILLOW DR.  
TAMPA, FL 33618

## Current Mailing Address:

4230 WINDING WILLOW DR.  
TAMPA, FL 33624

## New Mailing Address:

4230 WINDING WILLOW DR.  
TAMPA, FL 33618

FEI Number: 45-0463643

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRESTON, ALAN J  
4230 WINDING WILLOW DR.  
TAMPA, FL 33624 US

## Name and Address of New Registered Agent:

PRESTON, ALAN J  
4230 WINDING WILLOW DR.  
TAMPA, FL 33618 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:

04/22/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: PRESTON, ALAN J  
Address: 4230 WINDING WILLOW DR  
City-St-Zip: TAMPA, FL 33624

Title: MGRM ( ) Delete  
Name: HOWARD, SAMUEL P  
Address: 14715 SEMINOLE TRAIL  
City-St-Zip: SEMINOLE, FL 33776

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PRESTON, ALAN J  
Address: 4230 WINDING WILLOW DR  
City-St-Zip: TAMPA, FL 33618

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

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: ALAN J. PRESTON

MGRM

04/22/2005

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