

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000019979

**FILED**  
**Feb 24, 2008**  
**Secretary of State**

**Entity Name:** BEACON MANAGEMENT CONSULTANTS, LLC

**Current Principal Place of Business:**

C/O 6309 CORPORATE COURT  
SUITE 115  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 6309 CORPORATE COURT  
SUITE 115  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 04-3717533

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DONNER, RICHARD A CPA,PA  
6309 CORPORATE COURT  
SUITE 115  
FT. MYERS, FL 33919 US

**Name and Address of New Registered Agent:**

DONNER, R  
6309 CORPORATE COURT  
SUITE 115  
FT. MYERS, FL 33919 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: R DONNER

02/24/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KRPALEK, DANIEL  
Address: 6309 CORPORATE COURT SUITE 115  
City-St-Zip: FORT MYERS, FL 33919

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify 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: R DONNER

RA

02/24/2008

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