

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030530

FILED
Apr 01, 2009
Secretary of State

Entity Name: JANSON CONSULTING SERVICES, LLC

Current Principal Place of Business:

289 NW PALMETTO BLVD
LAKE CITY, FL 32055 US

New Principal Place of Business:

Current Mailing Address:

289 NW PALMETTO BLVD
LAKE CITY, FL 32055 US

New Mailing Address:

FEI Number: 61-1431444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JANSON, THEODORE L JR.
289 NW PALMETTO BLVD
LAKE CITY, FL 32055 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: MGRM () Delete
Name: JANSON, THEODORE L JR
Address: 289 NW PALMETTO BLVD
City-St-Zip: LAKE CITY, FL 32055

Title: MGRM () Delete
Name: JANSON, RANDALL L
Address: 144 NW PERKINS PL
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES:

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

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: THEODORE L. JANSON, JR.

MGRM

04/01/2009

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