

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032375

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** PELICAN CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

13850 MARTINIQUE DRIVE  
SEMINOLE, FL 33776

**New Principal Place of Business:**

**Current Mailing Address:**

13850 MARTINIQUE DRIVE  
SEMINOLE, FL 33776

**New Mailing Address:**

**FEI Number:** 52-2391537

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ELLRODT, LESTER L  
13850 MARTINIQUE DRIVE  
SEMINOLE, FL 33776 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: ELLRODT, LESTER L  
Address: 13850 MARTINIQUE DR  
City-St-Zip: SEMINOLE, FL 33776 US

Title: MGRM ( ) Delete  
Name: ELLRODT, NANCY J  
Address: 13850 MARTINIQUE DR  
City-St-Zip: SEMINOLE, FL 33776 US

**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 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:** LESTER L ELLRODT

MGR

04/29/2005

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