

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004848

FILED
May 06, 2004
Secretary of State

Entity Name: NICHOLSON CONSULTING, LLC

Current Principal Place of Business:

2269 W. SILVER PALM DRIVE
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

2269 W. SILVER PALM DRIVE
BOCA RATON, FL 33432

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, JENNIFER S ESQUIRE
C/O LEOPOLD, KORN & LEOPOLD, P.A.
20801 BISCAYNE BOULEVARD, #501
AVENTURA, FL 33180 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: MGRM () Delete
Name: NICHOLSON, PETER J
Address: 2269 W. SILVER PALM DRIVE
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM (X) Delete
Name: NICHOLSON, MIKE
Address: 2269 W. SILVER PALM DRIVE
City-St-Zip: BOCA RATON, FL 33432

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: PETER NICHOLSON, MANAGING MEMBER

MGRM

05/06/2004

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