

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000006573

**FILED**  
**Jan 18, 2005**  
**Secretary of State**

**Entity Name:** MALONE CONSULTING GROUP, LLC

**Current Principal Place of Business:**

2030 3RD STREET, SOUTH, STE #113  
JACKSONVILLE BCH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

2030 3RD STREET, SOUTH, STE #113  
JACKSONVILLE BCH, FL 32250

**New Mailing Address:**

**FEI Number:** 57-1152250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MALONE, TOMMY  
805 6TH AVENUE, SOUTH  
JACKSONVILLE, FL 32250 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: MALOYE, TOMMY  
Address: 805 6TH AVE S.  
City-St-Zip: JACKSONVILLE, FL 32290

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MALONE, TOMMY  
Address: 805 6TH AVE S.  
City-St-Zip: JACKSONVILLE, FL 32290

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:** TOMMY MALONE

MGR

01/18/2005

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