

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040711

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: WILLIGAN CONSULTING LLC

**Current Principal Place of Business:**

617 SIERRA MADRE  
NORTH FORT MYERS, FL 33903 US

**New Principal Place of Business:**

20998 SKYLER DRIVE  
NORTH FORT MYERS, FL 33917 US

**Current Mailing Address:**

617 SIERRA MADRE  
NORTH FORT MYERS, FL 33903 US

**New Mailing Address:**

20998 SKYLER DRIVE  
NORTH FORT MYERS, FL 33917 US

FEI Number: 20-0327285

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIGAN, WALTER L  
617 SIERRA MADRE  
NORTH FORT MYERS, FL 33903 US

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

WILLIGAN, WALTER L  
20998 SKYLER DRIVE  
NORTH FORT MYERS, FL 33917 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:

01/14/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILLIGAN, WALTER L  
Address: 617 SIERRA MADRE  
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: MGRM ( ) Delete  
Name: WILLIGAN, ELIZABETH  
Address: 617 SIERRA MADRE  
City-St-Zip: NORTH FORT MYERS, FL 33903 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WILLIGAN, WALTER L  
Address: 20998 SKLYER DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33917 US

Title: MGRM (X) Change ( ) Addition  
Name: WILLIGAN, ELIZABETH  
Address: 20998 SKYLER DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33917 US

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: WALTER WILLIGAN

MGRM

01/14/2008

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