2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051357

Entity Name: GEO-LOGICAL CONSULTANTS, LLC

FILED Jan 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15210 AMBERLY DRIVE, #226 18207 CYPRESS STAND CIRCLE

TAMPA, FL 33647 TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

15210 AMBERLY DRIVE, #226 18207 CYPRESS STAND CIRCLE

TAMPA, FL 33647 TAMPA, FL 33647

FEI Number: 20-0098934 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WILHOIT, JACK C II

15210 AMBERLY DRIVE, #226

WILHOIT, JACK C II

18207 CYPRESS STAND CIRCLE

TAMPA, FL 33647 US TAMPA, FL 33647 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: JACK C. WILHOIT II 01/07/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: WILHOIT, JACK C II Name: WILHOIT, JACK C II

Address: 15210 AMBERLY DRIVE, #226 Address: 18207 CYPRESS STAND CIRCLE

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

Title: MGRM () Delete Title: () Change () Addition

 Name:
 HENDERSON, WILLIAM T
 Name:

 Address:
 8910 NORTH OREGON AVENUE
 Address:

 City-St-Zip:
 TAMPA, FL 33604
 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: JACK C. WILHOIT II MGRM 01/07/2005