

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051999

FILED
Apr 24, 2007
Secretary of State

Entity Name: AXON'S MANAGEMENT CONSULTANTS, LLC

Current Principal Place of Business:

137 NORTH HAMPTON DRIVE
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

137 NORTH HAMPTON DRIVE
DAVENPORT, FL 33837

New Mailing Address:

FEI Number: 20-0892565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTER, STEPHEN
43350 US HWY 27
SUITE A10
DAVENPORT, FL 33837 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/MANAGERS:

Title: MGR () Delete
Name: AXON, DAWN ELIZABETH
Address: 5 INVERDA AVENUE
City-St-Zip: BOLTON ENGLAND,

Title: MGR () Delete
Name: HOOPER, CHRISTINE
Address: 5 OAKWOOD DR
City-St-Zip: BOLTON ENGLAND,

Title: MGR () Delete
Name: SMITH, MIROLA AXON
Address: 125 NEW HALL LANE
City-St-Zip: BOLTON BL1 5215 ENGLAND,

Title: MGR () Delete
Name: AXON, ROY
Address: 137 NORTHAMPTON DR
City-St-Zip: DAVENPORT, FL 32837

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: THOMAS F KERNEY

AGT

04/24/2007

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