

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000051999

**FILED**  
**Apr 27, 2010**  
**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  
Name: AXON, DAWN ELIZABETH  
Address: 5 INVERDA AVENUE  
City-St-Zip: BOLTON ENGLAND,

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

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

Title: MGR  
Name: AXON, ROY  
Address: 137 NORTHAMPATON DR  
City-St-Zip: DAVENPORT, FL 32837

I hereby 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: ROY AXON

MR

04/27/2010

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