Jun 02, 2006 8:00 am 2006 LIMITED LIABILITY COMPANY Secretary of State ANNUAL REPORT 06-02-2006 90109 012 ****50.00 **DOCUMENT # L04000057318** 1. Entity Name JRD CONSULTING, L.L.C. 20046989 Mailing Address Principal Place of Business 1232 S. HOWARD AVE., SUITE 4 1232 S. HOWARD AVE., SUITE 4 TAMPA, FL 33606 TAMPA, FL 33606 3. Mailing Address 2. Principal Place of Business 1514 1/2 E. 8th St 1514 1/2 E. 8th St. Suite, Apt. #, etc Suite, Apt. #, etc. 04202006 CR2E083 (11/05) Chg-LLC 2nd Floor 2nd Floor City & State City & State 4. FEI Number Applied For Tampa, FL Tampa, FL 20-1469487 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired П Hillsborough Hillsborough 33605 33605 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name James R. Duncan DUNCAN, JAMES R Street Address (P.O. Box Number is Not Acceptable) 1232 S. HOWARD AVE., SUITE 4 TAMPA, FL 33606 1514 1/2 E. 8th St., 2nd Floor Zip Code 33605 City Tampa 8. The above named entity ement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered ager SIGNATURE e of registered agent and title if applicable Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. **MGRM** Addition LITLE ☐ Defete TITLE ✓ Change MGRM DUNCAN, JAMES R NAME NAME James R. Duncan 1514 1/2 E. 8th St., 2nd Floor 1232 S. HOWARD AVE., SUITE 4 STREET ADDRESS STREET ADDRESS Tampa, FL 33605 CHY-SI-ZIP TAMPA, FL 33606 CITY-ST-ZIP TITLE ☐ Delete HILE ☐ Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP MILLE ☐ Delete HILE Change Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY-S1-/IP CHTY ST 78P Delete Addition Change THR F FILLE NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP HTLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-\$1-ZIP THLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY - ST- ZIP CITY-S1-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATI

SIGNATURE:

FILED

Daytime Phone #

2006 LIMITED LIABILITY COMPANY
. ANNUAL REPORT

DOCUMENT # L0400057318 1. Entity Name JRD CONSULTING, L.E.C.							ATTACHMENT				
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2. Principal Plac		ess	3. Mailing Address				20046989				
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2nd Floor City & State			2nd Floor City & State				4. FEI Number Applied Fo			plied For	
ampa, FL Zip Country		Tampa, FL Zip Coul				9487 e of Status Desired		No. No. 8	ot Applicable ditional		
33605	6. Name	Hillsborough and Address of Curre	33605 ent Registered Agent	Hillsbo	orough		d Address of New i		ee Require gent	d	
DUNCAN, JA					Name James R. Duncan						
	NARD A	VE., SUITE 4				Street Address (P.O. Box Number is Not Acceptable)					
77.Wii 73, T E 33333						1514 1/2 E. 8th St., 2nd Floor					
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		is \$50.00 y 1, 2006						ke check pa a Departme	-	a	
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indicated or limited flabil	n this repo	rt is true and accurate	with this filing does not quality and that my signature shall ha istee empowered to execute the	ve the sam	e legal effect a	is if made under oa	ih, that I am a mana				
SIGNATL	IRF:	1/2 1				:	5/1/06 Date				
	SIGNATURE	AND TYPED OR PRINTED NAI	NE OF SIGNING MANAGING MEMBER,	MANAGER, OF	R AUTHORIZED RE	PRESENTATIVE /	Date	D	aylime Phone #		