

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000088368

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** HARRIOTT COMMUNICATIONS CONSULTANTS LLC

**Current Principal Place of Business:**

2043 WOODFIELD CIRCLE  
WEST MELBOURNE, FL 32904 US

**New Principal Place of Business:**

**Current Mailing Address:**

2043 WOODFIELD CIRCLE  
WEST MELBOURNE, FL 32904 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

HARRIOTT, CALVIN  
2043 WOODFIELD CIRCLE  
WEST MELBOURNE, FL 32904 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: P  
Name: HARRIOTT, CALVIN  
Address: 2043 WOODFIELD CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: T  
Name: HARRIOTT, CALVIN  
Address: 2043 WOODFIELD CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D  
Name: HARRIOTT, CALVIN  
Address: 2043 WOODFIELD CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: S  
Name: HARRIOTT, PEARLITA  
Address: 2043 WOODFIELD CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904

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: CALVIN C HARRIOTT

P

02/16/2010

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