

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000003547

FILED
Mar 01, 2006
Secretary of State**Entity Name:** J & T CONSULTING LLC**Current Principal Place of Business:**14568 AERIES WAY DRIVE
FT. MYERS, FL 33912**New Principal Place of Business:****Current Mailing Address:**14568 AERIES WAY DRIVE
FT. MYERS, FL 33912**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:**STRACHAN, JOHN T
14568 AERIES WAY DRIVE
FT. MYERS, FL 33912 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: MGRM () Delete
Name: STRACHAN, JOHN T
Address: 14568 AERIES WAY DRIVE
City-St-Zip: FT. MYERS, FL 33912Title: MGRM (X) Delete
Name: STRACHAN, JAIMEE B
Address: 14568 AERIES WAY DRIVE
City-St-Zip: FT. MYERS, FL 33912**ADDITIONS/CHANGES:**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 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: JOHN THOMAS STRACHAN

MR

03/01/2006

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