

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008245

FILED
Aug 28, 2008
Secretary of State

Entity Name: WORLD RESOURCES CONSULTANTS PROVIDER LLC

Current Principal Place of Business:

92 SADBERRY ROAD
QUINCY, FL 32351

New Principal Place of Business:

5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

92 SADBERRY ROAD
QUINCY, FL 32351

New Mailing Address:

5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL 33411

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 334110000 US

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: HAMILTON GRINLEY LTD, .
Address: RAMBLERS, ST IVES CLOSE
City-St-Zip: THEALE READING, UK UK

Title: MGR () Delete
Name: RENARD, JEAN G
Address: 1133 BROADWAY, SUITE 706
City-St-Zip: NEW YORK, NY 10010 US

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 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: JEAN RENARD

MGR

08/28/2008

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