

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073215

**FILED
Apr 18, 2007
Secretary of State**

Entity Name: BURCKART COLET CONSULTANTS, LLC

Current Principal Place of Business:

169 TEQUESTA DRIVE
SUITE #12E
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

169 TEQUESTA DRIVE
SUITE #12E
TEQUESTA, FL 33469

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:

BURCKART, WILLIAM E
169 TEQUESTA DRIVE
SUITE #12E
TEQUESTA, FL 33469 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 () Delete
Name: BURCKART, WILLIAM E
Address: 169 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: MGR () Delete
Name: COLET, ENRIQUE E
Address: 272 VILLAGE BLVD. #7112
City-St-Zip: TEQUESTA, FL 33469

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: WILLIAM E. BURCKART

MNGR

04/18/2007

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