## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000100850

FILED Apr 24, 2006 Secretary of State

Entity Name: COAST TO COAST MANAGEMENT CONSULTING, LLC

**New Principal Place of Business: Current Principal Place of Business:** 1435 SANDRA DR. FORT MYERS, FL 33901 **Current Mailing Address: New Mailing Address:** 1435 SANDRA DR. FORT MYERS, FL 33901 FEI Number: 20-3945504 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GUTTERY, RICHARD T 1435 SANDRA DR. FORT MYERS, FL 33901 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GUTTERY, RICHARD T Name: Name: 1435 SANDRA DR. Address: Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MURRAY, SCOTT P Name: Name: Address: 3900 GOLF TEE COURT #101 Address: City-St-Zip: FAIRFAX, VA 22033 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BEDAN, ANDREA S Name: Name: Address: 11744 DARLINGTON AVE #205 Address: City-St-Zip: LOS ANGELES, CA 90049 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: MAURER, GREGORY W Name: Address: 7 ORCHARD LANE Address: City-St-Zip: LAWRENCEVILLE, NJ 08648 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition WALKER, JAMES C Name: Name: 3 WEST BOULDER CREEK RD Address: Address: City-St-Zip: SIMI VALLEY, CA 93065 City-St-Zip: Title: () Delete Title: () Change () Addition FOSTER, VALENCIA Name: Name: Address: 2449 CASTLE HEIGHTS AVE Address: LOS ANGELES, CA 90034 City-St-Zip: 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: R. TODD GUTTERY MGRM 04/24/2006