2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jul 05, 2007
Secretary of State

DOCUMENT# L05000107904

Entity Name: CORNERSTONE CONSULTANTS LLC

Current Principal Place of Business:

3069 ANDERSON SNOW ROAD #417
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

3069 ANDERSON SNOW ROAD #417
SPRING HILL, FL 34609

New Mailing Address:

FEI Number: 20-4053601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YOHO, ROBERT W
4015 HANGING MOSS LOOP
SPRING HILL, FL 34609 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:	YOHO, ROBERT W	
Address:	4015 HANGING MOSS LOOP	
City-St-Zip:	SPRING HILL, FL 34609	
Title:	MGRM	( ) Delete
Name:	DAVIDSON, VAN	
Address:	7214 ORKNEY AVENUE N.	
City-St-Zip:	ST. PETERSBURG, FL 33709	
Title:	MGRM	( ) Delete
Name:	BRAUN, DIANE	
Address:	13955 SUNSET DRIVE	
City-St-Zip:	LARGO, FL 33774	
Title:	MGR	( ) Delete
Name:	JOSEPH, BISHOP	
Address:	324 SORONO DRIVE	
City-St-Zip:	GREENVILLE, SC 29606	
Title:	MGR	( ) Delete
Name:	DAVID, STEEN	
Address:	602 SOUTH BOULEVARD	
City-St-Zip:	TAMPA, FL 33606	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGRM	( ) Change (X) Addition
Name:	SCIULLI, EUGENE	
Address:	1024 NORTH SHORE DRIVE NE	
City-St-Zip:	ST. PETERSBURG, FL 33711 US	

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: EUGENE SCIULLI MGRM 07/05/2007

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