2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# L06000029990

Entity Name: DIMENSIONS EVENT CONSULTING, LLC

Current Principal Place of Business:

11048 BUGGY WHIP DRIVE
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

1100 KINGS RD.
P O BOX 41563
JACKSONVILLE, FL 32203

New Mailing Address:

FEI Number: 74-3161488 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZEIGLER, DENISE J
11048 BUGGY WHIP DR.
JACKSONVILLE, FL 32257 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: MERRIWEATHER, MAE R
Address: 2839 SELAWICK LN
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: MGR ( ) Delete
Name: ROGERS-MOODY, ANDREA L
Address: 8969 POLK AVE
City-St-Zip: JACKSONVILLE, FL 32208 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: MAE R MERRIWEATHER MGR 04/02/2009

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