2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 08, 2008
Secretary of State

DOCUMENT# L06000040543

Entity Name: SANWAL CONSULTING, LLC

Current Principal Place of Business:

16719 TIGER TRAIL
SPRING HILL, FL 34610 US

New Principal Place of Business:

Current Mailing Address:

16719 TIGER TRAIL
SPRING HILL, FL 34610 US

New Mailing Address:

FEI Number: 20-4717356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COTGREAVE, SANDRA
16719 TIGER TRAIL
SPRING HILL, FL 34610 US

Name and Address of New Registered Agent:

COTGREAVE, SANDRA L MGRM
16719 TIGER TRAIL
SPRING HILL, FL 34610 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: SANDRA L COTGREAVE 03/08/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: COTGREAVE, SANDRA
Address: 16719 TIGER TRAIL
City-St-Zip: SPRING HILL, FL 34610 US

Title: MGRM ( ) Delete
Name: COTGREAVE, WALTER
Address: 16719 TIGER TRAIL
City-St-Zip: SPRING HILL, FL 34610 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: COTGREAVE, SANDRA L MGRM
Address: 16719 TIGER TRAIL
City-St-Zip: SPRING HILL, FL 34610 US

Title: MGRM (X) Change ( ) Addition
Name: COTGREAVE, WALTER H MGRM
Address: 16719 TIGER TRAIL
City-St-Zip: SPRING HILL, FL 34610 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: SANDRA L COTGREAVE MGRM 03/08/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date