

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063895

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: DEVELOPER'S CONSULTING GROUP, L.L.C.

**Current Principal Place of Business:**

891 S.W. GRAND RESERVES BLVD.  
ST. LUCIE WEST, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

891 S.W. GRAND RESERVES BLVD.  
ST. LUCIE WEST, FL 34986

**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:**

GATSOS, ELAINE M  
1499 WEST PALMETTO PARK ROAD, SUITE 210  
BOCA RATON, FL 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: HAYS, ANDI  
Address: 891 S.W. GRAND RESERVES BLVD.  
City-St-Zip: ST. LUCIE WEST, FL 34986

Title: MGRM ( ) Delete  
Name: BRAM, ROY  
Address: 13015 S.W. 89TH PLACE, SUITE 216  
City-St-Zip: MIAMI, FL 33176

**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: ANDI HAYS

MGRM

04/30/2007

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