

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069405

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ON HAND CONSULTING SERVICES LLC

## Current Principal Place of Business:

57 LANCASTER ROAD  
BOYNTON BEACH, FL 33426 US

## New Principal Place of Business:

1020 NW LEONARDO CIRCLE  
PORT ST. LUCIE, FL 34986 US

## Current Mailing Address:

P.O. BOX 740336  
BOYNTON BEACH, FL 33474 US

## New Mailing Address:

1020 NW LEONARDO CIRCLE  
PORT ST. LUCIE, FL 34986 US

FEI Number: 20-5216373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAND-CARULLO, MARIE  
57 LANCASTER ROAD  
BOYNTON BEACH, FL 33436 US

## Name and Address of New Registered Agent:

HAND-CARULLO, MARIE  
1020 NW LEONARDO CIRCLE  
PORT ST. LUCIE, FL 34986 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:

04/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: PSDT ( ) Delete  
Name: HAND-CARULLO, MARIE  
Address: 57 LANCASTER ROAD  
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: CEO ( ) Delete  
Name: CARULLO, SALVATORE  
Address: 57 LANCASTER ROAD  
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: MGRM ( ) Delete  
Name: BAGSHAW, JESSYKA  
Address: 2718 COUNTRY CLUB DRIVE  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: PSDT (X) Change ( ) Addition  
Name: HAND-CARULLO, MARIE  
Address: 1020 NW LEONARDO CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: CEO (X) Change ( ) Addition  
Name: CARULLO, SALVATORE  
Address: 1020 NW LEONARDO CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: MGRM (X) Change ( ) Addition  
Name: QUATTLEBAUM, JESSYKA  
Address: 103 BRIGHTON CIRCLE  
City-St-Zip: DOTHAN, AL 36305 US

Title: MGRM ( ) Change (X) Addition  
Name: BAGSHAW, DEREK  
Address: 871 UNIVERSITY DRIVE, APT. 201  
City-St-Zip: JUPITER, FL 33458

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: MARIE HAND-CARULLO

PSDT

04/30/2009

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