

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000084498

FILED
Apr 29, 2008
Secretary of State

Entity Name: FIRST COAST CERTIFIED LEGAL NURSE CONSULTANTS LLC

Current Principal Place of Business:

6 MAPLE STREET
FLAGLER BEACH, FL 32136

New Principal Place of Business:

2421 KACIE LANE
ST. AUGUSTINE, FL 32084

Current Mailing Address:

6 MAPLE STREET
FLAGLER BEACH, FL 32136

New Mailing Address:

2421 KACIE LANE
ST. AUGUSTINE, FL 32084

FEI Number: 20-5444596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LADEMANN, SHERRI
6 MAPLE STREET
FLAGLER BEACH, FL 32136 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: LADEMANN, SHERRI
Address: 6 MAPLE STREET
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM () Delete
Name: ROGERO, MICHELE G
Address: 2421 KACIE LANE
City-St-Zip: ST AUGUSTINE, FL 32084

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: SHERRI LADEMANN

MGRM

04/29/2008

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