

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099669

FILED  
May 21, 2007  
Secretary of State

**Entity Name:** PROFESSIONAL PLACEMENT CONSULTANTS LLC

**Current Principal Place of Business:**

14434 HAMPSHIRE BAY CIRCLE  
WINTERGARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

14434 HAMPSHIRE BAY CIRCLE  
WINTERGARDEN, FL 34787

**New Mailing Address:**

FEI Number: 20-8156267      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SHAW, JEROME  
14434 HAMPSHIRE BAY CIRCLE  
WINTERGARDEN, FL 34787      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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SHAW, JEROME  
Address: 14434 HAMPSHIRE BAY CIRCLE  
City-St-Zip: WINTERGARDEN, FL 34787

Title: MGRM ( ) Delete  
Name: SHAW, GLORIA  
Address: 14434 HAMPSHIRE BAY CIRCLE  
City-St-Zip: WINTERGARDEN, FL 34787

**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: GLORIA SHAW

MGRM

05/21/2007

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