

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033573

FILED
Jun 15, 2009
Secretary of State

Entity Name: AFFINITY CONSULTING, LLC

Current Principal Place of Business:

9503 S.W. 33RD LANE
GAINESVILLE, FL 32608

New Principal Place of Business:

2700 EAST BAY ISLE DRIVE SE
ST. PETERSBURG, FL 33705

Current Mailing Address:

9503 S.W. 33RD LANE
GAINESVILLE, FL 32608

New Mailing Address:

2700 EAST BAY ISLE DRIVE SE
ST. PETERSBURG, FL 33705

FEI Number: 20-8805814 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:

ADAMS, LYNN K
9503 S.W. 33RD LANE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

ADAMS, LYNN K
2700 EAST BAY ISLE DRIVE SE
ST. PETERSBURG, FL 33705 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: LYNN K ADAMS

06/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADAMS, LYNN K
Address: 9503 S.W. 33RD LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM () Delete
Name: ADAMS, ALLAN W
Address: 9503 S.W. 33RD LANE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADAMS, LYNN K
Address: 2700 EAST BAY ISLE DRIVE SE
City-St-Zip: ST. PETERSBURG, FL 33705

Title: MGRM (X) Change () Addition
Name: ADAMS, ALLAN W
Address: 2700 EAST BAY ISLE DRIVE SE
City-St-Zip: ST. PETERSBURG, FL 33705

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: LYNN K ADAMS

MGRM

06/15/2009

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