

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000048998

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** ROBERTSON CONSULTING LLC

**Current Principal Place of Business:**

825 WHITE EAGLE CIRCLE  
SAINT AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

771 TIDES END DRIVE  
SAINT AUGUSTINE, FL 32080 US

**Current Mailing Address:**

825 WHITE EAGLE CIRCLE  
SAINT AUGUSTINE, FL 32086 US

**New Mailing Address:**

771 TIDES END DRIVE  
SAINT AUGUSTINE, FL 32080 US

**FEI Number:** 20-8990659

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTSON, WADE  
825 WHITE EAGLE CIRCLE  
SAINT AUGUSTINE, FL 32086 US

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

ROBERTSON, WADE  
771 TIDES END DRIVE  
SAINT AUGUSTINE, FL 32080 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: WADE ROBERTSON

02/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROBERTSON, WADE  
Address: 771 TIDES END DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

I hereby 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: WADE ROBERTSON

PRES

02/17/2011

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