

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053789

**FILED**  
**Mar 26, 2008**  
**Secretary of State**

**Entity Name:** JSM CONSTRUCTION CONSULTING, LLC

**Current Principal Place of Business:**

200 COLONIAL CENTER PARKWAY  
SUITE 130  
LAKE MARY, FL 32746

**New Principal Place of Business:**

241 RIPPLING LANE  
WINTER PARK, FL 32789

**Current Mailing Address:**

200 COLONIAL CENTER PARKWAY  
SUITE 130  
LAKE MARY, FL 32746

**New Mailing Address:**

241 RIPPLING LANE  
WINTER PARK, FL 32789

**FEI Number:** 26-0203035

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOTTRAM, JEFFREY S  
200 COLONIAL CENTER PARKWAY  
SUITE 130  
LAKE MARY, FL 32746 US

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

MOTTRAM, JEFFREY S  
241 RIPPLING LANE  
WINTER PARK, FL 32789 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:

03/26/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MOTTRAM, JEFFREY S  
Address: 200 COLONIAL CENTER PARKWAY, SUITE 130  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MOTTRAM, JEFFREY S  
Address: 241 RIPPLING LANE  
City-St-Zip: WINTER PARK, FL 32789

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: JEFFREY MOTTRAM

MGR

03/26/2008

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