

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000056683

Entity Name: B.S. CONSULTING, LLC

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

80 CAMELLIA DR  
MONTICELLO, FL 32344 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1295  
MONTICELLO, FL 32345 US

**New Mailing Address:**

FEI Number: 20-4468007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SATTERWHITE, WILLIAM B  
80 CAMELLIA DR  
MONTICELLO, FL 32344 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: MGM  
Name: SATTERWHITE, WILLIAM B  
Address: 80 CAMELLIA DR  
City-St-Zip: MONTICELLO, FL 32344 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: WILLIAM B SATTERWHITE

MGM

01/05/2010

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