

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000062172

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** VALADEZ CONSULTING, LLC.

**Current Principal Place of Business:**

3040 FOXHILL CIR  
#102  
APOPKA, FL 32703 US

**New Principal Place of Business:**

700 CARIBBEAN DR  
DAVENPORT, FL 33897 US

**Current Mailing Address:**

522 HUNT CLUB BLVD  
374  
APOPKA, FL 327038184 US

**New Mailing Address:**

P.O. BOX 136830  
CLERMONT, FL 34713 US

FEI Number: 26-1822137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VALADEZ, MICHAEL  
522 HUNT CLUB BLVD  
374  
APOPKA, FL 327038184 US

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

VALADEZ, MICHAEL S  
700 CARIBBEAN DR  
DAVENPORT, FL 33897 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: MICHAEL S VALADEZ

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VALADEZ, MICHAEL  
Address: 3040 FOXHILL CIR #102  
City-St-Zip: APOPKA, FL 32703 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VALADEZ, MICHAEL S  
Address: P.O. BOX 136830  
City-St-Zip: CLERMONT, FL 34713 US

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: MICHAEL S VALADEZ

MEM

04/30/2009

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