

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076793

FILED
Mar 21, 2009
Secretary of State

Entity Name: THE GENESIS CONSULTANTS, LLC

Current Principal Place of Business:

541 AVELLINO ISLES CIRCLE
#30101
NAPLES, FL 34119 US

New Principal Place of Business:

Current Mailing Address:

541 AVELLINO ISLES CIRCLE
#30101
NAPLES, FL 34119 US

New Mailing Address:

FEI Number: 26-0590806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEISER, DONNA
541 AVELLINO ISLES CIRCLE
#30101
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

HEISER, DONNA C
541 AVELLINO ISLES CIRCLE
#30101
NAPLES, FL 34119 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: DONNA C. HEISER

03/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HEISER, DONNA
Address: 541 AVELLINO ISLES CIRCLE #30101
City-St-Zip: NAPLES, FL 34119 US

Title: MGRM () Delete
Name: HEISER, GENE
Address: 541 AVELLINO ISLES CIRCLE #30101
City-St-Zip: NAPLES, FL 34119 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HEISER, DONNA C
Address: 541 AVELLINO ISLES CIRCLE #30101
City-St-Zip: NAPLES, FL 34119 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DONNA C. HEISER

MGRM

03/21/2009

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