

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000083916

**FILED  
Apr 14, 2009  
Secretary of State**

**Entity Name:** CONTRACTOR CONSULTING, LLC

**Current Principal Place of Business:**

803 INDIAN RIVER AVENUE  
TITUSVILLE, FL 32780 US

**New Principal Place of Business:**

**Current Mailing Address:**

803 INDIAN RIVER AVENUE  
TITUSVILLE, FL 32780 US

**New Mailing Address:**

**FEI Number:** 26-0813086

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** ( )

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

EIGENMANN, CONRAD D JR.  
803 INDIAN RIVER AVENUE  
TITUSVILLE, FL 32780 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: MGR ( ) Delete  
Name: EIGENMANN, CONRAD D JR.  
Address: 803 INDIAN RIVER AVENUE  
City-St-Zip: TITUSVILLE, FL 32780 US

**ADDITIONS/CHANGES:**

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: CONRAD D EIGENMANN, JR

MGR

04/14/2009

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