

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000107800

**FILED**  
**Jul 13, 2009**  
**Secretary of State**

**Entity Name:** CONSULTING AND PROJECT MANAGEMENT LLC

**Current Principal Place of Business:**

1903 60TH PLACE  
M3327  
BRADENTON, FL 34203

**New Principal Place of Business:**

1378 CHESAPEAKE AVE  
NAPLES, FL 34102

**Current Mailing Address:**

1903 60TH PLACE  
M3327  
BRADENTON, FL 34203

**New Mailing Address:**

1378 CHESAPEAKE AVE  
NAPLES, FL 34102

**FEI Number:** 26-1528428      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

US AG 24 INC  
3001 N. ROCKY POINT DRIVE EAST  
2ND FLOOR  
TAMPA, FL 33607 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: HOFER, ERWIN  
Address: NIEMETZSTR. 20  
City-St-Zip: BERLIN, D 12055

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: ERWIN HOFER

MGR

07/13/2009

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