2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 20, 2009
Secretary of State

DOCUMENT# L08000041731

Entity Name: BCS CONSULTANTS, LLC

Current Principal Place of Business:

4041 LEESWAY CIRCLE
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

4041 LEESWAY CIRCLE
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 26-2481941 **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:

SCHWAB, JOHN W II
4041 LEESWAY CIRCLE
PENSACOLA, FL 32504 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: MGRM ( ) Delete
Name: SCHWAB, JOHN W II
Address: 4041 LEESWAY CIRCLE
City-St-Zip: PENSACOLA, FL 32504

Title: MGRM ( ) Delete
Name: OWENS, JAMES E
Address: 17322 PIKES PEEK CT.
City-St-Zip: TOMBALL, TX 77377

Title: MGRM ( ) Delete
Name: CHASTAIN, RICHARD R
Address: 7302 TREEWATER
City-St-Zip: HOUSTON, TX 77072

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: BIVENS, JAMES E
Address: 17322 PIKES PEEK CT.
City-St-Zip: TOMBALL, TX 77377

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

Title: MGRM ( ) Change (X) Addition
Name: DAMARE, ROBERT
Address: 178 ISLANDER DR
City-St-Zip: SLIDELL, LA 79458

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: JOHN W. SCHWAB, II MR 08/20/2009

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