

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069582

Entity Name: AC SCHRAFF CONSULTING, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

4313 JEREMYS LANDING DR. S
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

4313 JEREMYS LANDING DR. S
JACKSONVILLE, FL 32258

New Mailing Address:

P.O. BOX 24482
JACKSONVILLE, FL 32241

FEI Number: 26-3015707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHRAFF, AMANDA C PRES.
4313 JEREMYS LANDING DR. S
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

SCHRAFF, AMANDA C
4313 JEREMYS LANDING DR. S
JACKSONVILLE, FL 32258 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: AMANDA SCHRAFF

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: SCHRAFF, AMANDA C PRES.
Address: 4313 JEREMYS LANDING DR S.
City-St-Zip: JACKSONVILLE, FL 32258 US

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: SCHRAFF, AMANDA C
Address: P.O. BOX 24482
City-St-Zip: JACKSONVILLE, FL 32241 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: AMANDA SCHRAFF

PRES

04/22/2009

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