

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000098802

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA STRATEGIC CONSULTANTS, LLC

**Current Principal Place of Business:**

1 BISCAYNE TOWER, 2 S. BISCAYNE BLVD.  
21ST FLOOR  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

390 N. ORANGE AVE.  
SUITE 1400  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 N. ORANGE AVE.  
SUITE 1400  
ORLANDO, FL 32801 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: PRES  
Name: BUCHAN, TAMMY J  
Address: 390 N. ORANGE AVE., STE. 1400  
City-St-Zip: ORLANDO, FL 32801 US

Title: VP  
Name: SMEKENS, CONNIE M  
Address: 390 N. ORANGE AVE., STE. 1400  
City-St-Zip: ORLANDO, FL 32801 US

I hereby 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: TAMMY J. BUCHAN

PRES

04/28/2011

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