

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000062699

**FILED**  
**Aug 03, 2010**  
**Secretary of State**

**Entity Name:** TURNKEY CONSULTANT GROUP L.L.C.

**Current Principal Place of Business:**

18495 SOUTH DIXIE HIGHWAY, SUITE 345  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

18495 SOUTH DIXIE HIGHWAY, SUITE 345  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 27-0514663      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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  
**Name:** BROWNE, MICHAEL A  
**Address:** 18495 SOUTH DIXIE HIGHWAY, SUITE 345  
**City-St-Zip:** MIAMI, FL 33157

**Title:** MGR  
**Name:** NEWKIRK, NORMAN K  
**Address:** 18495 SOUTH DIXIE HIGHWAY, SUITE 345  
**City-St-Zip:** MIAMI, FL 33157

**Title:** S  
**Name:** BROWNE, MICHAEL A  
**Address:** 18495 SOUTH DIXIE HIGHWAY, SUITE 345  
**City-St-Zip:** MIAMI, FL 33157

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: NORMAN NEWKIRK

MGR

08/03/2010

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