


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # L99000006649 1. Entity Name TIMASKA CONSULTING LLC		
Principal Place of Business 215 SUNBELT CIRCLE SANFORD, FL 32771		Mailing Address 1261 CHARWEST DR. WOODLAND PARK, CO 80863
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MITCHELL, GARY D 215 SUNBELT CIRCLE SANFORD, FL 32771		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MITCHELL, GARY 1261 CHARWEST DRIVE WOODLAND PARK, CO 80863	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MITCHELL, GREG 1261 CHARWEST DR. WOODLAND PARK, CO 80863	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MITCHELL, BETTY J 1261 CHARWEST DR WOODLAND PARK, CO 80863	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Gary Mitchell Gary Mitchell</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		



01032007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0956181	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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01/10/07-80022-012 50.00

**DO NOT WRITE
IN THIS SPACE**