

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000961

FILED
Feb 11, 2009
Secretary of State

Entity Name: STEVENS CONSULTANT SERVICES, LLC

Current Principal Place of Business:

520 SANTA ROSA BLVD. #414
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

520 SANTA ROSA BLVD. #414
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 58-2399207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, SCOTT
520 SANTA ROSA BLVD., SUITE 414
FT. WALTON BEACH, FL 32548 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: STEVENS, SCOTT
Address: 520 SANTA ROSA BLVD., SUITE 414
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGRM () Delete
Name: STEVENS, MARK L
Address: 7356 CADENCIA STREET
City-St-Zip: CARLSBAD, CA 92009

ADDITIONS/CHANGES:

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

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

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: SCOTT STEVENS

MGRM

02/11/2009

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