

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000123504

Entity Name: CONSULTED GROUP, INC.

**FILED**  
**Mar 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

93 S. BLUE HERON DRIVE  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

93 S. BLUE HERON DRIVE  
SANTA ROSA BEACH, FL 32459

**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:**

CROWE, ELIZABETH C  
93 S. BLUE HERON DRIVE.  
SANTA ROSA BEACH, FL 32459 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CROWE, ELIZABETH C  
Address: 93 S. BLUE HERON DRIVE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VP  
Name: CROWE, JASON K  
Address: 93 S. BLUE HERON DRIVE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JASON CROWE

VP

03/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date