

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000257471

**Entity Name:** OCM CONSULTING GROUP LLC

**Current Principal Place of Business:**

6330 W. GLENROSE RIDGE RD.  
1534  
CRETE, NE 68333

**Current Mailing Address:**

6330 W. GLENROSE RIDGE RD.  
CRETE, NE 68333 US

**FEI Number:** 83-2404607

**Certificate of Status Desired:** No

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

KELLEY, ERIN  
7800 POINT MEADOWS DR  
324  
JACKSONVILLE, FL 32256 US

*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

**Authorized Person(s) Detail :**

Title MGR  
Name WARD, ANDREW  
Address 6330 W. GLENROSE RIDGE RD.  
City-State-Zip: CRETE NE 68333

Title AMBR  
Name KELLEY, ERIN T  
Address 7800 POINT MEADOWS DR  
324  
City-State-Zip: JACKSONVILLE FL 32256

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANDREW WARD

MGR

02/17/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date