2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2008
Secretary of State

DOCUMENT# L02000003874

Entity Name: DANIEL SECKLER, CONSULTANT PHARMACIST, LLC

Current Principal Place of Business:

2439 ROLLING OAKS DR.
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

2439 ROLLING OAKS DR.
PALM HARBOR, FL 34683

New Mailing Address:

FEI Number: 02-0560339 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SECKLER, DANIEL A
2439 ROLLING OAKS DR.
PALM HARBOR, FL 34683 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: P ( ) Delete
Name: SECKLER, DANIEL A
Address: 2439 ROLLING OAKS DR
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES:

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: DANIEL A. SECKLER P 01/05/2008

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