

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002990

FILED
Aug 01, 2007
Secretary of State

Entity Name: PRIVATE WEALTH GROUP, LLC

Current Principal Place of Business:

3001 N. ROCKY POINT DR. EAST, STE 200
TAMPA, FL 33607

New Principal Place of Business:

100 NORTH TAMPA STREET
SUITE 1910
TAMPA, FL 33602

Current Mailing Address:

3001 N. ROCKY POINT DR. EAST, STE 200
TAMPA, FL 33607

New Mailing Address:

100 NORTH TAMPA STREET
SUITE 1910
TAMPA, FL 33602

FEI Number: 65-1202629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SEGUNDO, STEPHEN F
3001 N. ROCKY POINT DR. EAST, STE 200
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

SEGUNDO, STEPHEN F
100 NORTH TAMPA STREET
SUITE 1910
TAMPA, FL 33602 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: STEPHEN F. SEGUNDO

08/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SEGUNDO, STEPHEN F
Address: 3001 N. ROCKY POINT DR. EAST, STE 200
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SEGUNDO, STEPHEN F
Address: 100 NORTH TAMPA AVENUE
City-St-Zip: TAMPA, FL 33602

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: STEPHEN F. SEGUNDO

MGRM

08/01/2007

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