

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064549

Entity Name: RETIREMENT STRATEGIES, LLC

Current Principal Place of Business:

9471 BAYMEADOWS ROAD
SUITE 303
JACKSONVILLE, FL 32256

Current Mailing Address:

9471 BAYMEADOWS ROAD
SUITE 303
JACKSONVILLE, FL 32256

FEI Number: 20-3320123

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATRICK, MARK RCPA
4029 ATLANTIC BLVD.
JACKSONVILLE, FL 32207 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 MGRM
Name HART, WILLIAM S
Address 9471 BAYMEADOWS ROAD, SUITE
303
City-State-Zip: JACKSONVILLE FL 32256

Title MGRM
Name CARR, JAMES W
Address 9471 BAYMEADOWS ROAD, SUITE
303
City-State-Zip: JACKSONVILLE FL 32256

Title MGR
Name NEELEY, MARY BETH
Address 9471 BAYMEADOWS ROAD, SUITE
303
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: WILLIAM S HART

MANAGING MEMBER

01/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date