# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L05000064549

Entity Name: RETIREMENT STRATEGIES, LLC

# **Current Principal Place of Business:**

10751 DEERWOOD PARK BLVD SUITE 302 JACKSONVILLE, FL 32256

# **Current Mailing Address:**

10751 DEERWOOD PARK BLVD. SUITE 302 JACKSONVILLE, FL 32256 US

# FEI Number: 20-3320123

# 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

# Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	HART, WILLIAM S	Name	CARR, JAMES W
Address	10751 DEERWOOD PARK BLVD. SUITE 302	Address	10751 DEERWOOD PARK BLVD. SUITE 302
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	MOR		
Title	MGR		
Name	NEELEY, MARY BETH		
Address	10751 DEERWOOD PARK BLVD. SUITE 302		

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:	MGRM	02/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

Date