

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000104102

**Entity Name:** UNITED WEALTH PROTECTION CONCEPTS OF FLORIDA LLC

**Current Principal Place of Business:**

1015 WHITE TAIL AVE SW  
VERO BEACH, FL 32968

**Current Mailing Address:**

1015 WHITE TAIL AVE SW  
VERO BEACH, FL 32968 US

**FEI Number:** 20-5775229

**Certificate of Status Desired:** No

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

UNITED CORPORATE & BUSINESS SERVICES OF FL  
1015 WHITE TAIL AVE SW  
VERO BEACH, FL 32968 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 REID, LYNETTE  
Address 1015 WHITE TAIL AVE SW  
City-State-Zip: VERO BEACH FL 32968

Title MGR  
Name UNITED CORPORATE & BUSINESS SERVICES OF NV LLC  
Address 1015 WHITE TAIL AVE SW  
City-State-Zip: VERO BEACH FL 32968

*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:** LYNETTE REID

MGRM

04/29/2014

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date