

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000080687

**Entity Name:** RETIREMENT ADVISORY CONSULTANTS, LLC

**Current Principal Place of Business:**

5509 GRAND BLVD., STE 200  
NEW PORT RICHEY, FL 34652

**Current Mailing Address:**

5509 GRAND BLVD., STE 200  
NEW PORT RICHEY, FL 34652 US

**FEI Number:** 26-3228617

**Certificate of Status Desired:** No

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

FONTAINE, TINA J  
925 WESTWINDS BLVD.  
TARPON SPRINGS, FL 34689 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:** TINA J FONTAINE

04/22/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRES  
Name            FONTAINE, TINA J  
Address        5509 GRAND BLVD., STE 200  
City-State-Zip: NEW PORT RICHEY FL 34652

Title            TRES  
Name            FONTAINE, TINA J  
Address        5509 GRAND BLVD., STE 200  
City-State-Zip: NEW PORT RICHEY FL 34652

*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:** TINA J FONTAINE

**PRESIDENT**

04/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date