

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000006195

**Entity Name:** INSURANCE & FINANCIAL PLANNERS LLC

**Current Principal Place of Business:**

9156D SW 23RD STREET  
DAVIE, FL 33324

**Current Mailing Address:**

9156D SW 23RD STREET  
DAVIE, FL 33324

**FEI Number:** 27-1719104

**Certificate of Status Desired:** No

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

GLUCKMAN, DAVID  
9156D SW 23RD STREET  
DAVIE, FL 33324 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 MGR  
Name JULIE HARTE, GLUCKMAN  
Address 9156D SW 23RD STREET  
City-State-Zip: DAVIE FL 33324

Title AMBR  
Name GLUCKMAN, DAVID  
Address 9156D SW 23RD STREET  
City-State-Zip: DAVIE FL 33324

*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:** DAVID GLUCKMAN

**OWNER**

**01/15/2018**

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

\_\_\_\_\_  
Date