

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003154

FILED
Feb 06, 2008
Secretary of State

Entity Name: THE CENTER FOR FINANCIAL, LEGAL & TAX PLANNING, INC.

Current Principal Place of Business:

4501 W. DEYOUNG ST., SUITE 200
MARION, IL 62959

New Principal Place of Business:

Current Mailing Address:

4501 W. DEYOUNG ST., SUITE 200
MARION, IL 62959

New Mailing Address:

FEI Number: 37-1116641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BASI, BART A
525 GUNWALE LANE
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BASI, BART A
Address: 525 GUNWALE LANE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: DS () Delete
Name: BASI, CAROL L
Address: 4501 W. DEYOUNG ST., SUITE 200
City-St-Zip: MARION, IL 62959

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BASI, ROMAN A
Address: 4501 W. DEYOUNG STREET SUITE 200
City-St-Zip: MARION, IL 62959

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROMAN A. BASI

PD

02/06/2008

Electronic Signature of Signing Officer or Director

Date