2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005257

Entity Name: PROFESSIONAL PLANNERS MARKETING GROUP, LLC

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New	/ Principal Place of Business:
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636 US HIGHWAY ONE SUITE 205 NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

PO BOX 14457 636 US HIGHWAY ONE

NORTH PALM BEACH, FL 334080457 SUITE 205 NORTH PALM BEACH, FL 33408

FEI Number: 65-1005744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, 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

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition Name: PETERSON, BRIAN Name: PETERSON, BRIAN

 Address:
 5701 GOLDEN HILLS DR
 Address:
 636 US HIGHWAY ONE, STE 205

 City-St-Zip:
 MINNEAPOLIS, MN 55416
 City-St-Zip:
 NORTH PALM BEACH, FL 33408

 Name:
 SANDBERG, STEVE
 Name:

 Address:
 636 U.S. HWY ONE, SUITE 205
 Address:

 City-St-Zip:
 NORTH PALM BEACH, FL 33408
 City-St-Zip:

Title: SRVP () Delete Title: MGR (X) Change () Addition

Name: TUCKER, DANIEL R Name: THOMAS, ANTHONY

 Address:
 636 U.S. HWY ONE, SUITE 205
 Address:
 636 U.S. HWY ONE, SUITE 205

 City-St-Zip:
 NORTH PALM BEACH, FL 33408
 City-St-Zip:
 NORTH PALM BEACH, FL 33408

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 LUCIA, MARIA
 Name:

 Address:
 5701 GOLDEN HILLS DR
 Address:

 City-St-Zip:
 MINNEAPOLIS, MN 55416
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 LUND, DAVE
 Name:

 Address:
 5701 GOLDEN HILLS DR
 Address:

 City-St-Zip:
 MINNEAPOLIS, MN 55416
 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 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 608, Florida Statutes.

SIGNATURE: JENNIFER SPANGLER POA 04/30/2008