

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010689

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: WEALTH STRATEGY PARTNERS, L.C.

## Current Principal Place of Business:

1800 SECOND STREET  
SUITE 758  
SARASOTA, FL 34236

## New Principal Place of Business:

## Current Mailing Address:

1800 SECOND STREET  
SUITE 758  
SARASOTA, FL 34236

## New Mailing Address:

FEI Number: 65-1132032      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSS, JEREMY P  
220 SOUTH FRANKLIN STREET  
TAMPA, FL 33602 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

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ALTHOLTZ, ADAM  
Address: 1800 SECOND ST., STE 758  
City-St-Zip: SARASOTA, FL 34236

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
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Title: ( ) Delete  
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Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ALTHOLTZ, ADAM MR  
Address: 1800 SECOND ST., STE 758  
City-St-Zip: SARASOTA, FL 34236

Title: MGRM ( ) Change (X) Addition  
Name: ALTHOLTZ, ADAM MR  
Address: 1800 2ND STREET - SUITE 758  
City-St-Zip: SARASOTA, FL 34240

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Name: ALTHOLTZ, ADAM MR  
Address: 1800 2ND STREET - SUITE 758  
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAM ALTHOLTZ

MGRM

01/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date