

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010719

FILED
Jan 05, 2006
Secretary of State

Entity Name: WEALTH STRATEGY PARTNERS II, L.C.

Current Principal Place of Business:

1800 SECOND ST., STE. 758
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1800 SECOND ST., STE. 758
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 30-0076966

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 ST.
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 E
Address: 1800 SECOND STREET, SUITE 758
City-St-Zip: SARASOTA, FL 34236

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

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

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

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

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

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: ADAM, ALTHOLTZ E MR
Address: 1800 2ND STREET - SUITE 758
City-St-Zip: SARASOTA, FL 34236

Title: MGRM () Change (X) Addition
Name: ADAM, ALTHOLTZ E MR
Address: 1800 2ND STREET - SUITE 758
City-St-Zip: SARASOTA, FL 34236

Title: MGRM () Change (X) Addition
Name: ADAM, ALTHOLTZ E MR
Address: 1800 2ND STREET - SUITE 758
City-St-Zip: SARASOTA, FL 34236

Title: MGRM () Change (X) Addition
Name: ADAM, ALTHOLTZ E MR
Address: 1800 2ND STREET - SUITE 758
City-St-Zip: SARASOTA, FL 34236

Title: MGRM () Change (X) Addition
Name: ADAM, ALTHOLTZ E MR
Address: 1800 2ND STREET - SUITE 758
City-St-Zip: SARASOTA, FL 34236

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