

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010719

FILED
Jan 04, 2007
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:

HARVEY, ALTHOLTZ DR
1800 2ND ST - SUITE 758
SARASOTA, FL 34236 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: HARVEY ALTHOLTZ

01/04/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

ADDITIONS/CHANGES:

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

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

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

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

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

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

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

01/04/2007

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