

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020521

FILED
Jul 19, 2005
Secretary of State

Entity Name: SAFE HARBOUR ELDER PLANNING, LLC

Current Principal Place of Business:

4043 HENDERSON BLVD.
TAMPA, FL 33629

New Principal Place of Business:

4734 W. ANITA BLVD.
TAMPA, FL 33611

Current Mailing Address:

4043 HENDERSON BLVD.
TAMPA, FL 33629

New Mailing Address:

4734 W. ANITA BLVD
TAMPA, FL 33611

FEI Number: 13-4209857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WICKER, ROBERT R
4043 HENDERSON BLVD.
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

WICKER, ROBERT R
4734 W. ANITA BLVD.
TAMPA, FL 33611 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: ROBERT R. WICKER

07/19/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WICKER, ROBERT R
Address: 4043 HENDERSON BLVD.
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WICKER, ROBERT R
Address: 4734 W. ANITA BLVD.
City-St-Zip: TAMPA, FL 33611

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT R. WICKER

MR.

07/19/2005

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