

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022108

FILED
Mar 30, 2009
Secretary of State

Entity Name: THE ADVISORS PLANNING GROUP, LLC

Current Principal Place of Business:

2520 N TAMIAMI TRAIL
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

2520 N TAMIAMI TRAIL
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 81-0568686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AABEL, SCOTT E
2520 N TAMIAMI TRAIL
NOKOMIS, FL 34275 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: AABEL, SCOTT E
Address: 7750 SILVER BELL LANE
City-St-Zip: SARASOTA, FL 34241

Title: M () Delete
Name: DIDONNA, GARY
Address: 4797 SWEETMEADOW CIR
City-St-Zip: SARASOTA, FL 34238

Title: M () Delete
Name: PROTIGAL, JAMES C
Address: 4520 WOODSIDE ROAD
City-St-Zip: SARASOTA, FL 34242

Title: M () Delete
Name: GOMES, ANTONIO
Address: 8858 FISHERMAN'S BAY
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: DIDONNA, GARY
Address: 4797 SWEETMEADOW CIR
City-St-Zip: SARASOTA, FL 34238

Title: MGR (X) Change () Addition
Name: PROTIGAL, JAMES C
Address: 4520 WOODSIDE ROAD
City-St-Zip: SARASOTA, FL 34242

Title: MGR (X) Change () Addition
Name: GOMES, ANTONIO
Address: 8858 FISHERMAN'S BAY
City-St-Zip: SARASOTA, FL 34231

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: GARY DIDONNA

MGR

03/30/2009

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