

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000032421

**FILED**  
**Apr 12, 2005**  
**Secretary of State**

**Entity Name:** FINANCE & ESTATE CONSULTING GROUP, LLC

**Current Principal Place of Business:**

5004 SOUTHWEST 21ST PLACE  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

16773 PANTHER PAW CT.  
FORT MYERS, FL 33908

**Current Mailing Address:**

5004 SOUTHWEST 21ST PLACE  
CAPE CORAL, FL 33914

**New Mailing Address:**

16773 PANTHER PAW CT.  
FORT MYERS, FL 33908

**FEI Number:** 02-0652086

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SSI ACCOUNTING AND TAX SERVICE, INC.  
1500 COLONIAL BLVD. STE. 235  
FORT MYERS, FL 33907 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: KLEBER, BODO  
Address: 5004 SW 21ST PLACE  
City-St-Zip: CAPE CORAL, FL 33914

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: KLEBER, BODO  
Address: 16773 PANTHER PAW CT.  
City-St-Zip: FORT MYERS, FL 33908

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: BODO KLEBER

MGR

04/12/2005

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