

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000027

FILED
Feb 05, 2005
Secretary of State

Entity Name: WEALTH MANAGEMENT CENTERS, LLC

Current Principal Place of Business:

420 S. NORTON AVE.
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

POB 555996
ORLANDO, FL 32855

New Mailing Address:

13885 SIENA LOOP
LAKEWOOD RANCH, FL 34202

FEI Number: 41-2075936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIGLIOTTI, ALFONSO L
POB 555996
ORLANDO, FL 32855 US

Name and Address of New Registered Agent:

VIGLIOTTI, ALFONSO L
13885 SIENA LOOP
LAKEWOOD RANCH, FL 32805 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: ALFONSO L. VIGLIOTTI

02/05/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: VIGLIOTTI, ALFONSO L CEO
Address: 5682 BENTGRASS DR., APT. 205
City-St-Zip: SARASOTA, FL 34235

Title: MGRM () Delete
Name: VIGLIOTTI, ANTONIO
Address: 5682 BENTGRASS DR.
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VIGLIOTTI, ALFONSO L CEO
Address: 13885 SIENA LOOP
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: MGRM (X) Change () Addition
Name: VIGLIOTTI, ANTONIO
Address: 13885 SIENA LOOP
City-St-Zip: LAKEWOOD RANCH, FL 34202

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: ALFONSO L. VILGIOTTI

CEO

02/05/2005

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