

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000003313

**FILED**  
**Feb 11, 2010**  
**Secretary of State**

**Entity Name:** STRATEGIC RETIREMENT ADVISORS, LLC

**Current Principal Place of Business:**

2521 W MARION AVE  
711  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

1133 BAL HARBOR BLVD  
1139  
PUNTA GORDA, FL 33950

**New Mailing Address:**

**FEI Number:** 26-1659184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, CHARLES R  
1133 BAL HARBOR BLVD  
1139  
PUNTA GORDA, FL 33950 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  
Name: BROWN, CHARLES R  
Address: 1133 BAL HARBOR BLVD STE.1139  
City-St-Zip: PUNTA GORDA, FL 33950

I hereby 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: CHARLES R. BROWN

MGRM

02/11/2010

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