

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005396

FILED
Mar 23, 2009
Secretary of State

Entity Name: ADVANCED RETIREMENT SOLUTIONS, LLC

Current Principal Place of Business:

3300 NORTH UNIVERSITY DRIVE
#302
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3300 NORTH UNIVERSITY DRIVE
#302
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 57-1151833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORKIN, ARLENE J
7087 GREAT FALLS CIRCLE
BOYNTON BEACH, FL 33437 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: MGR () Delete
Name: ORKIN & ASSOCIATES., INC.
Address: 3300 N. UNIVERSITY DR #302
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR () Delete
Name: SENIOR FIRST SOURCE,, LLC
Address: 3300 N. UNIVERSITY DRIVE #302
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

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

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

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: ARLENE J. ORKIN

MGR

03/23/2009

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