

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007205

FILED
Jan 17, 2008
Secretary of State

Entity Name: CHAPMAN PENSION CONSULTANTS, LLC

Current Principal Place of Business:

1528 N. MCCOVEY POINT
HERNANDO, FL 34442

New Principal Place of Business:

1072 W STAFFORD STREET
HERNANDO, FL 34442

Current Mailing Address:

1528 N. MCCOVEY POINT
HERNANDO, FL 34442

New Mailing Address:

PO BOX 129
HERNANDO, FL 34442

FEI Number: 59-3212156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, DONALD D
1528 N. MCCOVEY POINT
HERNANDO, FL 34442 US

Name and Address of New Registered Agent:

CHAPMAN, DONALD D
1072 W STAFFORD STREET
HERNANDO, FL 34442 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: DONALD D. CHAPMAN

01/17/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CHAPMAN, DONALD D
Address: 1528 N. MCCOVEY POINT
City-St-Zip: HERNANDO, FL 34442

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHAPMAN, DONALD D
Address: 1072 W STAFFORD STREET
City-St-Zip: HERNANDO, FL 34442

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: DONALD D. CHAPMAN

MRG

01/17/2008

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