2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006
Secretary of State

DOCUMENT# L03000053487

Entity Name: ESTATE PLANNING AND LEGACY LAW CENTER, PLC

Current Principal Place of Business:

1131 SYMONDS AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

159 LOOKOUT PLACE, SUITE 101
MAITLAND, FL 32751

Current Mailing Address:

1131 SYMONDS AVENUE
WINTER PARK, FL 32789

New Mailing Address:

159 LOOKOUT PLACE, SUITE 101
MAITLAND, FL 32751

FEI Number: 52-2436805 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WILDER, CHARLES W
1131 SYMONDS AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

WILDER, CHARLES W
159 LOOKOUT PLACE
SUITE 101
MAITLAND, FL FL 32751 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: CHARLES D. WILDER 05/02/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: WILDER, CHARLES D
Address: 1131 SYMONDS AVENUE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: WILDER, CHARLES D
Address: 159 LOOKOUT PLACE, SUITE 101
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES D. WILDER MGR 05/02/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date