

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004158

FILED
Mar 21, 2008
Secretary of State

Entity Name: ELDER CARE PLANNING, LLC

Current Principal Place of Business:

124 SARATOGA BLVD W
ROYAL PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

3564 AVALON PARK BLVD E STE 1
NO 106
ORLANDO, FL 32828

New Mailing Address:

3554 PEPPERVINE DRIVE
ORLANDO, FL 32828

FEI Number: 03-0537314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIOS, CARMEN
124 SARATOGA BLVD. WEST
ROYAL PALM BEACH, FL 33411 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: RIOS, CARMEN
Address: 124 SARATOGA BLVD. WEST
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: MGR () Delete
Name: BARRY, LUISA
Address: 3564 AVALON PARK BLVD EST STE 1
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: BARRY, LUISA
Address: 3554 PEPPERVINE DRIVE
City-St-Zip: ORLANDO, FL 32828 US

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: LUISA BARRY

MGMR

03/21/2008

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