2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000010231

1. Entity Name

INSTITUTE OF WEALTH MANAGEMENT, LLC



FILED Apr 09, 2008 08:00 All Secretary of State

Principal Place of Business

Mailing Address

2385 EXECUTIVE CENTER DRIVE, SUITE 100 BOCA RATON. FL 33431

2385 EXECUTIVE CENTER DRIVE, SUITE 100 BOCA RATON. FL 33431



04072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 36-4548637 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TINDER, JAMES R 2385 EXECUTIVE CENTER DRIVE, SUITE 100 BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

8.	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	1. I am familiar with, and accept
	the obligations of registered agent.	

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE; Registered Agent signature required when rainstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000838509 - 04/22/08-80016-018 138.75

9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	BRUNO, PETER		
STREET ADDRESS	<u>, </u>		
CITY-ST-ZIP	BOCA RATON, FL 33431		
IMLE	MGRM		
NAME	TINDER, JAMES R		
STREET ADDRESS	2385 EXECUTIVE CENTER DRIVE, SUITE 100		
CITY-ST-ZIP	BOCA RATON, FL 33431		
	DOOM TOTAL SOUTH		
TITLE			
NAME			
STREET ADDRESS			
CITY-SI-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
44 15	44 1 hazalar parify that the information annulled with this filling days are with for the con-		

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

James -

JAMIS R TINDEN

NING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4.9.8

800.592.5578

Desame Phone #