

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013225

FILED
Apr 30, 2007
Secretary of State

Entity Name: ARK FINANCIAL PLANNING, LLC

Current Principal Place of Business:

1694 MUIRFIELD DRIVE
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

<UNUSED>
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

1694 MUIRFIELD DRIVE
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: 20-0669157 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARBERRY, THOMAS G
1694 MUIRFIELD DRIVE
GREEN COVE SPRINGS, FL 32043 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: MGRM () Delete
Name: CARBERRY, THOMAS G
Address: 1694 MUIRFIELD DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: MGRM () Delete
Name: DAUNHAUER, CHRISTOPHER F
Address: 9863 OLD PLANK ROAD
City-St-Zip: JACKSONVILLE, FL 32220

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: THOMAS CARBERRY MGRM 04/30/2007

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