

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044451

FILED
Mar 17, 2008
Secretary of State

Entity Name: INTEGRATED RETIREMENT SOLUTIONS, LLC

Current Principal Place of Business:

3005 CARING WAY
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

4161 TAMIAMI TRAIL, SUITE 502
PORT CHARLOTTE, FL 33952

Current Mailing Address:

3005 CARING WAY
PORT CHARLOTTE, FL 33952

New Mailing Address:

4161 TAMIAMI TRAIL, SUITE 502
PORT CHARLOTTE, FL 33952

FEI Number: 20-4098674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSLAND, BRIAN W
3005 CARING WAY
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

CROSLAND, BRIAN W
4161 TAMIAMI TRAIL, SUITE 501
PORT CHARLOTTE, FL 33952 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:

03/17/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CROSLAND, BRIAN W
Address: 3005 CARING WAY, SUITE A
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGRM () Delete
Name: JOINER, J. SCOTT
Address: 3005 CARING WAY, SUITE A
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGRM () Delete
Name: SCHORTZ, JOSEPH R
Address: 3977 LACOSTA ISLAND CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: MGRM () Delete
Name: SORAH, DARA B
Address: 18123 REGAN AVE
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CROSLAND, BRIAN W
Address: 4161 TAMIAMI TRAIL, SUITE 501
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGRM (X) Change () Addition
Name: JOINER, J. SCOTT
Address: 4161 TAMIAMI TRAIL, SUITE 501
City-St-Zip: PORT CHARLOTTE, FL 33952

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: BRIAN W CROSLAND

MGRM

03/17/2008

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