

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000077944

Entity Name: PLANASERP.COM, LLC

FILED
Jul 14, 2008
Secretary of State

Current Principal Place of Business:

ATTN: HERBERT WRIGHT
441 VILLAGE LANE
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

ATTN: HERBERT WRIGHT
441 VILLAGE LANE
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 13-4342935 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:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: WRIGHT, HERBERT H
Address: 945 SO. LAGOON LANE
City-St-Zip: MANTOLOKING, NJ 08738

Title: S () Delete
Name: WRIGHT, MARTHA T
Address: 945 SO. LAGOON LANE
City-St-Zip: MANTOLOKING, NJ 08738

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WRIGHT, HERBERT H
Address: 954 SO. LAGOON LANE
City-St-Zip: MANTOLOKING, NJ 08738

Title: S (X) Change () Addition
Name: WRIGHT, MARTHA T
Address: 954 SO. LAGOON LANE
City-St-Zip: MANTOLOKING, NJ 08738

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: HERBERT H. WRIGHT

MGRM

07/14/2008

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