

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081510

FILED  
Feb 07, 2007  
Secretary of State

**Entity Name:** COMPREHENSIVE FINANCIAL NETWORK, LLC

**Current Principal Place of Business:**

LA ESTANCIA  
17302 AKINS DRIVE  
SPRING HILL, FL 34610 US

**New Principal Place of Business:**

**Current Mailing Address:**

LA ESTANCIA  
17302 AKINS DRIVE  
SPRING HILL, FL 34610 US

**New Mailing Address:**

**FEI Number:** 20-1895908

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WESLER, LYDIA J  
LA ESTANCIA  
17302 AKINS DRIVE  
SPRING HILL, FL 34610 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: WESLER, LYDIA J  
Address: 17302 AKINS DR  
City-St-Zip: SPRING HILL, FL 34610 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Change (X) Addition  
Name: WESLER, ROBERT C  
Address: 17302 AKINS DR  
City-St-Zip: SPRING HILL, FL 34610 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LYDIA J WESLER

MGRM

02/07/2007

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