2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000104610

Entity Name: LUCERNE WEALTH MANAGEMENT, LLC

FILED Apr 27, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
| 100 MEST LUCEDNE CIDCLE SUITE 500 | |

100 WEST LUCERNE CIRCLE, SUITE 500 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

100 WEST LUCERNE CIRCLE, SUITE 500
ORLANDO, FL 32801
100 WEST LUCERNE CIRCLE
SUITE 500
ORLANDO, FL 32801

FEI Number: 20-3677016 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SIMON, DAVID H

100 WEST LUCERNE CIRCLE, SUITE 500

100 WEST LUCERNE CIRCLE
SUITE 500

ORLANDO, FL 32801 US SUITE 500 ORLANDO, FL 32801 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: 04/27/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change (X) Addition TAYLOR, THOMAS K Name: Name: Address: Address: 100 W. LUCERNE CIRCLE, #500 City-St-Zip: City-St-Zip: ORLANDO, FL 32801 () Change (X) Addition Title: Title: () Delete Name: Name: SIMON, DAVID H Address: Address: 100 W. LUCERNE CIRCLE, #500 City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: () Change (X) Addition

 Name:
 Name:
 TAYLOR, STEVEN K

 Address:
 Address:
 100 W. LUCERNE CIRCLE, #500

 City-St-Zip:
 City-St-Zip:
 ORLANDO,, FL 32801

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: T. KEVIN TAYLOR MM 04/27/2006