

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036920

FILED  
Feb 15, 2008  
Secretary of State

Entity Name: STRATEGIC PLANNING SERVICES LLC

**Current Principal Place of Business:**

12337 CASCADES POINTE DRIVE  
BOCA RATON, FL 33432

**New Principal Place of Business:**

544 77TH STREET  
BOCA RATON, FL 33487

**Current Mailing Address:**

12337 CASCADES POINTE DRIVE  
BOCA RATON, FL 33428

**New Mailing Address:**

544 77TH STREET  
BOCA RATON, FL 33487

FEI Number: 20-4661212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUSINESS FILINGS INCORPORATED  
12337 CASCADES POINTE DRIVE  
BOCA RATON, FL 33428 US

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

GREEN, ADAM  
12337 CASCADES POINTE DRIVE  
BOCA RATON, FL 33428 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: ADAM GREEN

02/15/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GREEN, ADAM  
Address: 12337 CASCADES POINTE DRIVE  
City-St-Zip: BOCA RATON, FL 33428

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

**ADDITIONS/CHANGES:**

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

Title: MGR ( ) Change (X) Addition  
Name: GREEN, WILLIAM  
Address: 6744 EAST LISERON  
City-St-Zip: BOYNTON BEACH, FL 33437

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: ADAM GREEN

MGR

02/15/2008

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