

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061026

FILED  
May 18, 2007  
Secretary of State

Entity Name: RETIREMENT INCOME PLANS, LLC

**Current Principal Place of Business:**

655 FOUNTAIN LANE  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

655 FOUNTAIN LANE  
NAPLES, FL 34103

**New Mailing Address:**

FEI Number: 20-5171118      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:**

COFFMAN, ERIC T ESQ  
CHEFFY, PASSISOMO, WILSON & JOHNSON, LLP  
821 FIFTH AVENUE SOUTH, SUITE 201  
NAPLES, FL 34102 US

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

NOVATT, JEFF M ESQ  
CHEFFY, PASSISOMO, WILSON & JOHNSON, LLP  
821 FIFTH AVENUE SOUTH, SUITE 201  
NAPLES, FL 34102 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: JEFF M. NOVATT, ESQ.

05/18/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DAUGHERTY, LYNN A  
Address: 655 FOUNTAIN LANE  
City-St-Zip: NAPLES, FL 34103

**ADDITIONS/CHANGES:**

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: LYNN A. DAUGHERTY

MGR

05/18/2007

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