

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000064964

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** INSURANCE & FINANCIAL PLANNING GROUP LLC

**Current Principal Place of Business:**

2810 NE 14TH ST  
OCALA, FL 34470 US

**New Principal Place of Business:**

1028 E. SILVER SPRINGS BLVD  
OCALA, FL 34470 US

**Current Mailing Address:**

2810 NE 14TH ST  
OCALA, FL 34470 US

**New Mailing Address:**

1028 E. SILVER SPRINGS BLVD  
OCALA, FL 34470 US

**FEI Number:** 34-2065721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HENRY, BARBARA  
2810 NE 14TH ST  
OCALA, FL 34470 US

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

HENRY, BARBARA  
1028 E. SILVER SPRINGS BLVD  
OCALA, FL 34470 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: BARBARA HENRY

01/05/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HENRY, BARBARA  
Address: 1028 E. SILVER SPRINGS BLVD  
City-St-Zip: Ocala, FL 34470 US

I hereby 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: BARBARA HENRY

MGR

01/05/2010

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