

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000089342

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** RETIREMENT PLANNING ADVISORS, LLC

**Current Principal Place of Business:**

2401 WEST BAY DRIVE  
SUITE 427  
LARGO, FL 33770

**New Principal Place of Business:**

**Current Mailing Address:**

5 SOUTHWIND DRIVE  
BELLEAIR BLUFFS, FL 33770

**New Mailing Address:**

2401 WEST BAY DRIVE  
SUITE 427  
LARGO, FL 33770

**FEI Number:** 20-5534883

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'CONNOR, PATRICK M ESQ.  
C/O O'CONNOR & ASSOCIATES  
1250 S. BELCHER ROAD, SUITE 160  
LARGO, FL 33771 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: MGR  
Name: WINTERMEIER, GARY C SR.  
Address: 5 SOUTHWIND DRIVE  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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: GARY C. WINTERMEIER SR.

MGR

04/28/2010

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