

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116505

FILED  
Jul 09, 2008  
Secretary of State

Entity Name: ADVISORS FINANCIAL GROUP, LLC

**Current Principal Place of Business:**

13750 WEST COLONIAL DRIVE  
SUITE 330  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

2517 HIGHWAY 35  
BLDG B, SUITE 104  
MANASQUAN, NJ 08736

**New Mailing Address:**

FEI Number: 22-3626426      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:**

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

JUNGERS, RYAN  
13750 WEST COLONIAL DRIVE  
SUITE 330  
WINTER GARDEN, FL 34787 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: BMGR ( ) Delete  
Name: JUNGERS, RYAN  
Address: 13750 WEST COLONIAL DRIVE, SUITE 330  
City-St-Zip: WINTER GARDEN, FL 34787

Title: P ( ) Delete  
Name: MEYER, STEVEN T  
Address: 2517 HIGHWAY 35; BLDG B, SUITE 104  
City-St-Zip: MANASQUAN, NJ 08736

Title: PTR ( ) Delete  
Name: MEYER, C T  
Address: 2517 HIGHWAY 35; BLDG B, SUITE 104  
City-St-Zip: MANASQUAN, NJ 08736

Title: PTR ( ) Delete  
Name: CLARK, PAMELA J  
Address: 2517 HIGHWAY 35; BLDG B, SUITE 104  
City-St-Zip: MANASQUAN, NJ 08736

**ADDITIONS/CHANGES:**

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

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

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

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: STEVEN MEYER

PRES

07/09/2008

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