

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000094793

FILED
Jan 06, 2009
Secretary of State

Entity Name: FLORIDAS WEALTH MANAGEMENT GROUP LLC

Current Principal Place of Business:

7209 DERWENT GL CIR.
LAND O LAKES, FL 34637

New Principal Place of Business:

Current Mailing Address:

7209 DERWENT GL CIR.
LAND O LAKES, FL 34637

New Mailing Address:

PO BOX 1393
LAND O LAKES, FL 34639

FEI Number: 26-3333985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, DIANA M
7209 DERWENT GL CIR.
LAND O LAKES, FL 34637 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: MGRM () Delete
Name: JENKINS, DILLAN
Address: 7209 DERWENT GL CIR.
City-St-Zip: LAND O LAKES, FL 34637

Title: MGRM () Delete
Name: JENKINS, DIANA M
Address: 7209 DERWENT GL CIR.
City-St-Zip: LAND O LAKES, FL 34637

Title: MGRM () Delete
Name: WICKES, DONALD J
Address: 9324 CRESCENT LOOP CR #104
City-St-Zip: TAMPA, FL 33619

Title: MGRM () Delete
Name: FORD, TERRINA M
Address: 2746 BILLINGHAM DR
City-St-Zip: LAND O LAKES, FL 34639

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JENKINS, ALLAN
Address: PO BOX 1393
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM (X) Change () Addition
Name: JENKINS, DIANA M
Address: PO BOX 1393
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM (X) Change () Addition
Name: WICKES, DONALD J
Address: PO BOX 1393
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM (X) Change () Addition
Name: FORD, TERRINA M
Address: PO BOX 1393
City-St-Zip: LAND O LAKES, FL 34639

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: DIANA M JENKINS

TREA

01/06/2009

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