

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000106030

**FILED**  
**Apr 07, 2010**  
**Secretary of State**

**Entity Name:** PLANNING BENEFITS FLORIDA, LLC

**Current Principal Place of Business:**

4313 MIDDLE LAKE DRIVE  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

4313 MIDDLE LAKE DRIVE  
TAMPA, FL 33624

**New Mailing Address:**

**FEI Number:** 80-0363552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZARAGOZA, DOUGLAS P  
4313 MIDDLE LAKE DRIVE  
TAMPA, FL 33624 US

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

ZARAGOZA, STEPHANIE R  
4313 MIDDLE LAKE DRIVE  
TAMPA, FL 33624 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: STEPHANIE R. ZARAGOZA

04/07/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PLANNING BENEFITS FLORIDA, LLC  
Address: 4313 MIDDLE LAKE DRIVE  
City-St-Zip: TAMPA, FL 33624 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: STEPHANIE R. ZARAGOZA

MRS.

04/07/2010

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