

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000071970

FILED
Apr 11, 2012
Secretary of State

Entity Name: FULL SPECTRUM RETIREMENT PLANS, LLC

Current Principal Place of Business:

992 TAMIAMI TRAIL, SUITE H1
PORT CHARLOTTE, FL 339533868

New Principal Place of Business:

Current Mailing Address:

992 TAMIAMI TRAIL, SUITE H1
PORT CHARLOTTE, FL 339533868

New Mailing Address:

FEI Number: 27-2998426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVERETTE, GERMAINE
992 TAMIAMI TRAIL, SUITE H1
PORT CHARLOTTE, FL 339533868 US

Name and Address of New Registered Agent:

LEVERETTE, GERMAINE T
992 TAMIAMI TRAIL, SUITE H1
PORT CHARLOTTE, FL 339533868 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: GERMAINE T. LEVERETTE

04/11/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LEVERETTE, GERMAINE T
Address: 992 TAMIAMI TRAIL, SUITE H1
City-St-Zip: PORT CHARLOTTE, FL 339533868

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: GERMAINE T LEVERETTE

MGR

04/11/2012

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