2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2011
Secretary of State

DOCUMENT# L10000077952

Entity Name: INDEPENDENT RETIREMENT ADVISERS, LLC

Current Principal Place of Business:

3030 NORTH ROCKY POINT DRIVE WEST
SUITE 150
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

3030 NORTH ROCKY POINT DRIVE WEST
SUITE 150
TAMPA, FL 33607

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAMM, WILLIAM E
3030 NORTH ROCKY POINT DRIVE WEST
SUITE 150
TAMPA, FL 33607 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
Name: HAMM, WILLIAM E
Address: 3030 NORTH ROCKY POINT DRIVE WEST #150
City-St-Zip: TAMPA, FL 33607

Title: MGRM
Name: MCCORD, MICHAEL
Address: 3030 NORTH ROCKY POINT DRIVE WEST #150
City-St-Zip: TAMPA, FL 33607

Title: MGRM
Name: DAVIS, THOMAS C
Address: 3030 NORTH ROCKY POINT DRIVE WEST #150
City-St-Zip: TAMPA, FL 33607

Title: MGRM
Name: GARNETT, WILSON B
Address: 3030 NORTH ROCKY POINT DRIVE WEST #150
City-St-Zip: TAMPA, FL 33607

Title: MGRM
Name: VINETTE, EDWARD
Address: 3030 NORTH ROCKY POINT DRIVE WEST #150
City-St-Zip: TAMPA, FL 33607

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 Statues.

SIGNATURE: WILLIAM HAMM MGRM 03/18/2011

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