


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # L99000009098 1. Entity Name RETIREMENT COMPANIES OF AMERICA, L.L.C.	
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Principal Place of Business 6465 N. QUAIL HOLLOW RD. SUITE 400 MEMPHIS, TN 38120	Mailing Address 6465 N. QUAIL HOLLOW RD. SUITE 400 MEMPHIS, TN 38120
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DO NOT WRITE IN THIS SPACE



04222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 58-2519982	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CLARK, RONALD L 500 S. FLORIDA AVE. #800 LAKELAND, FL 33801
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TRAMMELL, CHARLES S 6465 N. QUAIL HOLLOW RD. #400 MEMPHIS, TN 38120
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05/11/07-80044-001 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 	Charles Trammell, Jr. Apr. 23, 2007 (901) 794-2598
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>