

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000006005

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Entity Name:** GAMEPLAN FINANCIAL MARKETING, LLC

**Current Principal Place of Business:**

300 PARKEBROOKE PLACE, STE 200  
WOODSTOCK, GA 30189

**New Principal Place of Business:**

**Current Mailing Address:**

300 PARKEBROOKE PLACE, STE 200  
WOODSTOCK, GA 30189

**New Mailing Address:**

**FEI Number:** 37-1430605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** MGR  
**Name:** PETERSON, BRIAN B MGR  
**Address:** 300 PARKEBROOKE PLACE, STE 200  
**City-St-Zip:** WOODSTOCK, GA 30189

**Title:** MGR  
**Name:** THOMAS, ANTHONY G MGR  
**Address:** 300 PARKEBROOKE PLACE, STE 200  
**City-St-Zip:** WOODSTOCK, GA 30189

**Title:** MGR  
**Name:** KOMIS, TIMOTHY MGR  
**Address:** 300 PARKEBROOKE PLACE, STE 200  
**City-St-Zip:** WOODSTOCK, GA 30189

**Title:** MGR  
**Name:** ODOM, STEPHEN MGR  
**Address:** 300 PARKEBROOKE PLACE, STE 200  
**City-St-Zip:** WOODSTOCK, GA 30189

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:** LAURA LOUIS

\_\_\_\_\_  
POA

\_\_\_\_\_  
04/06/2010

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