

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117386

FILED
Jul 12, 2006
Secretary of State

Entity Name: RETIREMENT PLANNING CONSULTANTS, INC.

Current Principal Place of Business:

5579 SOUTHEAST 44TH CIR
OCALA, FL 34480

New Principal Place of Business:

2133 SE FORT KING ST
OCALA, FL 34471

Current Mailing Address:

5579 SOUTHEAST 44TH CIR
OCALA, FL 34480

New Mailing Address:

2133 SE FORT KING ST
OCALA, FL 344710

FEI Number: 11-3724895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRANE, ROBERT W PSTD
579 SE 44TH CIRCLE
OCALA, FL 34480 US

Name and Address of New Registered Agent:

CRANE, ROBERT W PSTD
5579 SE 44TH CIRCLE
OCALA, FL 34480 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: ROBERT W CRANE

07/12/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CRANE, ROBERT W
Address: 5579 SOUTHEAST 44TH CIR
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT W CRANE

PRSD

07/12/2006

Electronic Signature of Signing Officer or Director

Date