

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000009761

Entity Name: BURKS FINANCIAL GROUP, LLC

Current Principal Place of Business:

5143 S. LAKELAND DR
SUITE 4
LAKELAND, FL 33813

Current Mailing Address:

5143 S. LAKELAND DR
SUITE 4
LAKELAND, FL 33813 US

FEI Number: 45-4335022

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, KEITH C
121 NORTH COLLINS STREET
PLANT CITY, FL 33564 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title	MANAGER	Title	VP
Name	BURKS, MATTHEW A	Name	LILLIE, JOHN T
Address	5143 S. LAKELAND DR SUITE 4	Address	5143 S. LAKELAND DR SUITE 4
City-State-Zip:	LAKELAND FL 33813	City-State-Zip:	LAKELAND FL 33813

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MATTHEW A BURKS

MANAGER

03/03/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date