


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000010870
 1. Entity Name
 PREMIER INSURANCE, LLC



Principal Place of Business Mailing Address
 4200 GULF SHORE BOULEVARD NORTH 4200 GULF SHORE BOULEVARD NORTH
 NAPLES, FL 34103 NAPLES, FL 34103



03152006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1041752	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 GREGORY, C. NEIL
 TRIANON CENTRE, THIRD FLOOR
 850 PARK SHORE DRIVE
 NAPLES, FL 34103

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

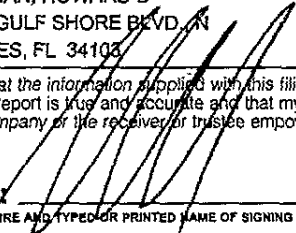
**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HORNBECK, HUNTLEY JR 4200 GULF SHORE BLVD., N NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUTGERT, SCOTT F 4200 GULF SHORE BLVD., N NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BENZA, STEPHEN 4200 GULF SHORE BLVD., N NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WILLIAMS, MARCUS 4200 GULF SHORE BLVD., N NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAKER, RICHARD J 4200 GULF SHORE BLVD., N NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GUTMAN, HOWARD B 4200 GULF SHORE BLVD., N NAPLES, FL 34103

U00000534135
 05/05/06-80151-011 50.00

DO NOT WRITE IN THIS SPACE

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  **Howard B. Gutman**
 Vice President of General Partners (239) 261-6100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #