

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040105

**FILED**  
**Mar 09, 2010**  
**Secretary of State**

**Entity Name:** FIRST ALLIANCE INSURANCE, LLC

**Current Principal Place of Business:**

4270 ALOMA  
172  
WINTER PARK, FL 32792

**New Principal Place of Business:**

2254 ALOMA AVENUE  
WINTER PARK, FL 32792

**Current Mailing Address:**

4270 ALOMA  
172  
WINTER PARK, FL 32792

**New Mailing Address:**

2254 ALOMA AVENUE  
WINTER PARK, FL 32792

FEI Number: 20-1176284

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UMPHREY, WALTER  
4270 ALOMA AVENUE, #172  
WINTER PARK, FL 32792 US

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

UMPHREY, WALTER  
2254 ALOMA AVE  
WINTER PARK, FL 32792 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: WALTER UMPHREY

03/09/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: UMPHREY, WALTER  
Address: 2254 ALOMA AVENUE  
City-St-Zip: WINTER PARK, FL 32792

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: WALTER UMPHREY

MGRM

03/09/2010

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