

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079118

FILED
Jan 04, 2005
Secretary of State

Entity Name: RNS INSURANCE CONSULTANTS, LLC

Current Principal Place of Business:

485 MOHAVE TERRACE
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

119 CROWN COLONY WAY
SANFORD, FL 32771 US

New Mailing Address:

485 MOHAVE TERRACE
LAKE MARY, FL 32746 US

FEI Number: 20-1831841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STURGILL, RICHARD N JR.
119 CROWN COLONY WAY
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

STURGILL, RICHARD N JR.
485 MOHAVE TERRACE
LAKE MARY, FL 32746 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: _____

01/04/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGMR () Delete
Name: STURGILL, RICHARD N JR.
Address: 485 MOHAVE TERRACE
City-St-Zip: LAKE MARY, FL 32746 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STURGILL, RICHARD N JR.
Address: 485 MOHAVE TERRACE
City-St-Zip: LAKE MARY, FL 32746 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: RICHARD N. STURGILL JR.

MGRM

01/04/2005

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