

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000077849

FILED
Jan 11, 2008
Secretary of State

Entity Name: AARON HARRIS INSURANCE SERVICES, LLC

Current Principal Place of Business:

3306 SW 26TH AVE
SUITE 401
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

PO BOX 831117
OCALA, FL 34483 11

New Mailing Address:

FEI Number: 01-0904276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, AARON
6 CEDAR TREE RUN
OCALA, FL 34471 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARRIS, AARON M
Address: 6 CEDAR TREE RUN
City-St-Zip: Ocala, FL 34471

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: AARON HARRIS

MGRM

01/11/2008

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