

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000036419

FILED
Apr 14, 2009
Secretary of State

Entity Name: SPECIALTY INSURANCE GROUP LLC

Current Principal Place of Business:

1088 E. ALTAMONTE DR, STE 100
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

1121 EDGEWATER DRIVE
ORLANDO, FL 32804

Current Mailing Address:

P O BOX 951744
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 26-2371110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IGLESIAS, CESAR H JR
326 FAIRFIELD DR
SANFORD, FL 32771 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR. () Change (X) Addition
Name: IGLESIAS, CESAR H JR.
Address: 1121 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

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: CESAR H IGLESIAS, JR.

MR.

04/14/2009

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