

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000036419

**FILED  
Apr 27, 2012  
Secretary of State**

**Entity Name:** SPECIALTY INSURANCE GROUP LLC

**Current Principal Place of Business:**

1121 EDGEWATER DRIVE  
ORLANDO, FL 32804

**New Principal Place of Business:**

**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:** MR.  
**Name:** IGLESIAS, CESAR H JR.  
**Address:** 1121 EDGEWATER DRIVE  
**City-St-Zip:** ORLANDO, FL 32804

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: CESAR IGLESIAS      AGNT      04/27/2012

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