

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000037645

**FILED**  
**Feb 03, 2010**  
**Secretary of State**

**Entity Name:** GOLDEN EAGLE INSURANCE, LLC

**Current Principal Place of Business:**

1247 SCOTTSLAND DRIVE  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

1247 SCOTTSLAND DRIVE  
LAKELAND, FL 33813

**New Mailing Address:**

FEI Number: 26-4393826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BACHLOTT, JEFFREY M  
1247 SCOTTSLAND DR  
LAKELAND, FL 33813 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  
Name: BACHLOTT, JEFFREY M  
Address: 1247 SCOTTSLAND DR  
City-St-Zip: LAKELAND, FL 33813

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: JEFFRY M BACHLOTT

MGRM

02/03/2010

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