

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000064152

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA PROPERTY INSURANCE MANAGEMENT, LLC

**Current Principal Place of Business:**

2822 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

2822 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

MYERS & FULLER, P.A.  
2822 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 US

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

BASS SOX MERCER  
2822 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 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: JOSHUA J. LOGAN

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BLUE WARRIOR CAPITAL, LLC  
Address: 68 WHITE STREET, STE 7-244  
City-St-Zip: RED BANK, NJ 07701 US

Title: MGRM  
Name: BMS GROUP LTD  
Address: ONE AMERICA SQUARE  
City-St-Zip: LONDON UNITED KINGDOM, EC3N2LS

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: JOSHUA J. LOGAN

ATTY

04/30/2010

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