

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000093752

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** SENTINEL INSURANCE GROUP, LLC

**Current Principal Place of Business:**

1761 W. HILLSBORO BLVD.  
SUITE 103  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

**Current Mailing Address:**

1761 W. HILLSBORO BLVD.  
SUITE 103  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

FEI Number: 27-3322919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ADKINS, PATRICIA  
1761 W. HILLSBORO BLVD.  
SUITE 103  
DEERFIELD BEACH, FL 33442 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: ADKINS, PATRICIA  
Address: 1761 W. HILLSBORO BLVD., SUITE 103  
City-St-Zip: DEERFIELD BEACH, FL 33442

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: PATRICIA ADKINS

MEMB

04/19/2011

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