

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003373

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: COLEMONT INSURANCE BROKERS OF GEORGIA LLC

**Current Principal Place of Business:**

4445 NORTH A1A, STE. 240  
VERO BEACH, FL 32963

**New Principal Place of Business:**

2859 PACES FERRY RD  
STE 1500  
ATLANTA, GA 30339 US

**Current Mailing Address:**

4445 NORTH A1A, STE. 240  
VERO BEACH, FL 32963

**New Mailing Address:**

3100 MONTICELLO AVE  
STE 600  
DALLAS, TX 752053439 US

FEI Number: 20-0335218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/MEMBERS:**

Title: P ( ) Delete  
Name: ROSS, JAMES C  
Address: 2859 PACES FERRY RD STE 1500  
City-St-Zip: ATLANTA, GA 30339

Title: CEO ( ) Delete  
Name: KATH, MARSHALL  
Address: 3100 MONTICELLO AVE STE 600  
City-St-Zip: DALLAS, TX 752053439

Title: CFO ( ) Delete  
Name: KELLER, JOY  
Address: 3100 MONTICELLO AVE STE 600  
City-St-Zip: DALLAS, TX 752053439

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ROSS, JAMES C PRES  
Address: 2859 PACES FERRY RD STE 1500  
City-St-Zip: ATLANTA, GA 30339 US

Title: MGR (X) Change ( ) Addition  
Name: KATH, MARSHALL P CEO  
Address: 3100 MONTICELLO AVE STE 600  
City-St-Zip: DALLAS, TX 752053439 US

Title: MGR (X) Change ( ) Addition  
Name: KELLER, JOY J CFO  
Address: 3100 MONTICELLO AVE STE 600  
City-St-Zip: DALLAS, TX 752053439

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KRIS STONE

AVP

04/27/2005

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