

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000001549

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** SUPPLEMENTAL INSURANCE MARKETING, L.L.C.

**Current Principal Place of Business:**

137 MAIN STREET, SUITE 400  
DUBUQUE, IA 52001

**New Principal Place of Business:**

**Current Mailing Address:**

137 MAIN STREET, SUITE 400  
DUBUQUE, IA 52001

**New Mailing Address:**

FEI Number: 27-1337531

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WIGGINS, CHARLES T  
BEGGS AND LANE, RLLP  
501 COMMENDENCIA ST.  
PENSACOLA, FL 32502 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: PLATINUM SUPPLEMENTAL INSURANCE, INC.  
Address: 137 MAIN STREET, SUITE 400  
City-St-Zip: DUBUQUE, IA 52001

Title: MGRM  
Name: CREMA, LLC  
Address: 1275 MILWAUKEE AVE.  
City-St-Zip: GLENVIEW, IL 60025

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: WAYNE A BRIGGS

PRES

01/17/2012

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