

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000539

FILED  
Jul 05, 2007  
Secretary of State

Entity Name: INSUREONE INDEPENDENT INSURANCE AGENCY, LLC

## Current Principal Place of Business:

4450 SOJOURN DR., #500  
ADDISON, TX 75001

## New Principal Place of Business:

## Current Mailing Address:

4450 SOJOURN DR., #500  
ADDISON, TX 75001

## New Mailing Address:

FEI Number: 36-4485332      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: CALLAHAN, KEVIN R  
Address: 4450 SOJOURN DR., #500  
City-St-Zip: ADDISON, TX 75001

Title: MGR      ( ) Delete  
Name: MCPADDEN, M. SEAN  
Address: 4450 SOJOURN DR., #500  
City-St-Zip: ADDISON, TX 75001

Title: MGR      ( ) Delete  
Name: NOLAN, KATHERINE C  
Address: 4450 SOJOURN DR., #500  
City-St-Zip: ADDISON, TX 75001

Title: MGR      ( ) Delete  
Name: PAPE, MARK E  
Address: 4450 SOJOURN DR., #500  
City-St-Zip: ADDISON, TX 75001

Title: MGR      ( ) Delete  
Name: SNYDER, DAVID B  
Address: 4450 SOJOURN DR., #500  
City-St-Zip: ADDISON, TX 75001

Title: MGR      ( ) Delete  
Name: BILLINGS, SCOTT K  
Address: 4450 SOJOURN DRIVE, SUITE 500  
City-St-Zip: ADDISON, TX 75001

## ADDITIONS/CHANGES:

Title: MGR      (X) Change ( ) Addition  
Name: CALLAHAN, KEVIN R  
Address: 150 HARVESTER DRIVE, SUITE 300  
City-St-Zip: BURR RIDGE, IL 60527

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR      (X) Change ( ) Addition  
Name: PAPE, MARK E  
Address: 4450 SOJOURN DR., #500  
City-St-Zip: ADDISON, TX 75001

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR      (X) Change ( ) Addition  
Name: FISHER, JOSEPH G  
Address: 150 HARVESTER DRIVE, SUITE 300  
City-St-Zip: BURR RIDGE, IL 60527

Title: MGR      (X) Change ( ) Addition  
Name: VAUGAHN, V. VAN  
Address: 4450 SOJOURN DRIVE, SUITE 500  
City-St-Zip: ADDISON, TX 75001

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOSEPH G. FISHER

MGR

07/05/2007

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