ZAPPASODI, RICHARD J II 8037 OLD TOWN DRIVE ORLANDO, FL 32819 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.			
RICHARD J ZAPPASODI II			05/13/2014
Electronic Signature of Registered Agent			Date
Officer/Director Detail :			
DIRECTOR	Title	DIRECTOR	
ZAPPASODI, RICHARD A	Name	ZAPPASODI, LYDIA E	
8037 OLD TOWN DRIVE	Address	8037 OLD TOWN DRIVE	
ORLANDO FL 32819-3919	City-State-Zip:	ORLANDO FL 32819-3919	
DIRECTOR			
ZAPPASODI, RICHARD J II			
8037 OLD TOWN DRIVE			
ORLANDO FL 32819-3919			
	I DRIVE 2819 US entity submits this statement for the purpose of changing its regists RICHARD J ZAPPASODI II Electronic Signature of Registered Agent tor Detail : DIRECTOR ZAPPASODI, RICHARD A 8037 OLD TOWN DRIVE ORLANDO FL 32819-3919 DIRECTOR ZAPPASODI, RICHARD J II 8037 OLD TOWN DRIVE	I DRIVE 2819 US entity submits this statement for the purpose of changing its registered office or regists RICHARD J ZAPPASODI II Electronic Signature of Registered Agent tor Detail : DIRECTOR Title ZAPPASODI, RICHARD A Name 8037 OLD TOWN DRIVE Address ORLANDO FL 32819-3919 City-State-Zip: DIRECTOR ZAPPASODI, RICHARD J II 8037 OLD TOWN DRIVE	IDRIVE 2819 US entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice RICHARD J ZAPPASODI II Electronic Signature of Registered Agent tor Detail : DIRECTOR Title DIRECTOR ZAPPASODI, RICHARD A Name ZAPPASODI, LYDIA E 8037 OLD TOWN DRIVE Address 8037 OLD TOWN DRIVE ORLANDO FL 32819-3919 City-State-Zip: ORLANDO FL 32819-3919 DIRECTOR ZAPPASODI, RICHARD J II 8037 OLD TOWN DRIVE

8037 OLD TOWN DRIVE ORLANDO, FL 32819-3919 US

FEI Number: 02-0586700

Name and Address of Current Registered Agent:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. PRESIDENT

SIGNATURE: RICHARD A ZAPPASODI

05/13/2014

Date

Electronic Signature of Signing Officer/Director Detail

FILED May 13, 2014 Secretary of State CC7825542839

Certificate of Status Desired: Yes

2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000042737

Entity Name: LTC INSURANCE SPECIALISTS, INC.

Current Principal Place of Business:

8037 OLD TOWN DRIVE ORLANDO, FL 32819-3919

Current Mailing Address: