

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000042778

**Entity Name:** ADVANCED INSURANCE BROKERAGE LLC

**Current Principal Place of Business:**

1463 OAKFIELD DR  
SUITE 123  
BRANDON, FL 33511

**Current Mailing Address:**

1463 OAKFIELD DR  
SUITE 123  
BRANDON, FL 33511 US

**FEI Number:** 26-4802464

**Certificate of Status Desired:** No

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

RANKIN, DAVID P  
18540 N DALE MABRY  
LUTZ, FL 33548 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SAHEBZAMANI, DAVID H  
Address 8146 CANTERBURY LAKE BLVD  
City-State-Zip: TAMPA FL 33619

Title MGRM  
Name MCKINNON, ERIC  
Address 2741 BUCKHORN PRESERVE BLVD  
City-State-Zip: VALRICO FL 33596

Title MGRM  
Name BRAKEFIELD, LISA  
Address 615 IVANHOE LN  
City-State-Zip: HOLMES BEACH FL 34217

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LISA J BRAKEFIELD

**MANAGING PARTNER**

**01/11/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date