

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000078838

Entity Name: THOMAS INSURANCE SERVICES, LLC

Current Principal Place of Business:

3235-A U.S. HIGHWAY 27/441
FRUITLAND PARK, FL 34731

Current Mailing Address:

3235-A U.S. HIGHWAY 27/441
FRUITLAND PARK, FL 34731

FEI Number: 27-0756963

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOLTYSIAK, SUSAN D
3235-A U.S. HIGHWAY 27/441
FRUITLAND PARK, FL 34731 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: SUSAN D SOLTYSIAK

01/08/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	SEC	Title	MANAGING MEMBER
Name	THOMAS, SUSAN K	Name	SOLTYSIAK, SUSAN D
Address	3235-A US HWY 27/441	Address	3235-A U.S. HIGHWAY 27/441
City-State-Zip:	FRUITLAND PRK FL 34731	City-State-Zip:	FRUITLAND PARK FL 34731

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: SUSAN D SOLTYSIAK

REGISTERED AGENT

01/08/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date