

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000044692

Entity Name: INSURANCE4PEOPLE LLC

Current Principal Place of Business:

3344 TYRONE BLVD NORTH
ST. PETERSBURG, FL 33710

Current Mailing Address:

3344 TYRONE BLVD
ST. PETERSBURG, FL 33710

FEI Number: 46-2241437

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CUNNINGHAM, MONICA
111 SECOND AVE NE
SUITE 1600
ST. PETERSBURG, FL 33701 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 MGR
Name WOODWORTH, SHAWN
Address 1909 DORMIEONE CIR.
City-State-Zip: ST. PETERSBURG FL 33710

Title MGR
Name MODESITT, CINDY
Address 6283 109TH TERRACE N
City-State-Zip: PINELLAS PARK FL 33781

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: SHAWN WOODWORTH

MRG

01/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date