

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003747

FILED  
Jul 15, 2004  
Secretary of State

Entity Name: MEMBERS INSURANCE SERVICES, LLC

## Current Principal Place of Business:

1900 NW CORPORATE BLVD., SUITE 205 WEST  
BOCA RATON, FL 33431

## New Principal Place of Business:

1900 NW CORPORATE BLVD.  
SUITE 101 EAST  
BOCA RATON, FL 33431 US

## Current Mailing Address:

1900 NW CORPORATE BLVD., SUITE 205 WEST  
BOCA RATON, FL 33431

## New Mailing Address:

1900 NW CORPORATE BLVD.  
SUITE 101 EAST  
BOCA RATON, FL 33431 US

FEI Number: 65-0994437

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THE MACK GROUP, INC.  
1900 CORPORATE BLVD., STE. 110  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

THE MACK GROUP, INC.  
1900 CORPORATE BLVD.  
SUITE 101 EAST  
BOCA RATON, FL 33431 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: JAY E. MACK

07/15/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: T ( ) Delete  
Name: MACK, JAY  
Address: 1900 NW CORPORATE BLVD., SUITE 205 WEST  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MACK, JAY  
Address: 1900 NW CORPORATE BLVD, STE. 101 EAST  
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAY E. MACK

TRES

07/15/2004

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