2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000010317

1. Entity Name
TODD INSURANCE AGENCY, LLC

Principal Place of Business	Mailing Address
1506 HALLAM CT. N. LAKELAND, FL 33813	1506 HALLAM CT. N. LAKELAND, FL 33813

01132007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3667933
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

TODD, ROLAND S JR.
1506 HALLAM CT. N.
LAKELAND, FL 33813

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ROLAND S. TODD JR PRESIDENT Roland S Todd Jr 3-9-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	P
NAME	TODD, ROLAND S JR
STREET ADDRESS	1506 HALLAM CT N
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	VST
NAME	TODD, EVELYN C
STREET ADDRESS	1506 HALLAM CT N
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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03/23/07-80076-018 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Roland S Todd Jr ROLAND S. TODD JR - PRESIDENT 3-9-07 863-648-9275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #