

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003221

FILED
Jan 30, 2009
Secretary of State

Entity Name: PREFERRED INSURANCE CAPITAL CONSULTANTS, LLC

Current Principal Place of Business:

55 NE 5TH AVE
SUITE 502
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

55 NE 5TH AVE
SUITE 502
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-1082835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRIPPA, ANTHONY J
55 NE 5TH AVE
SUITE 502
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

GRIPPA, ANTHONY J
2130 GOLDEN EAGLE DR., W.
TALLAHASSEE, FL 32312 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: ANTHONY J GRIPPA

01/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GRIPPA, ANTHONY J
Address: 55 NE 5TH AVE SUITE 502
City-St-Zip: BOCA RATON, FL 33432

Title: MGR () Delete
Name: CAMILLERI, MICHAEL
Address: 55 NE 5TH AVE SUITE 502
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GRIPPA, ANTHONY J
Address: 2130 GOLDEN EAGLE DR., W.
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANTHONY J GRIPPA

P

01/30/2009

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