

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015372

FILED
May 01, 2007
Secretary of State

Entity Name: QUALITY INSURANCE PARTNERS, LLC

Current Principal Place of Business:

665 TOLLGATE ROAD
SUITE B
ELGIN, IL 60123

New Principal Place of Business:

555 TOLLGATE ROAD
SUITE H
ELGIN, IL 60123

Current Mailing Address:

665 TOLLGATE ROAD
SUITE B
ELGIN, IL 60123

New Mailing Address:

555 TOLLGATE ROAD
SUITE H
ELGIN, IL 60123

FEI Number: 65-1135767 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MANLEY, MARSHALL
2475 MARSEILLE DRIVE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MANLEY, MARSHALL
Address: 2475 MARSEILLE DRIVE
City-St-Zip: PALM BEACH GARDEN, FL 33410 US

Title: MGR () Delete
Name: BARHAM, NORMAN
Address: 18 LONG BEACH BOULEVARD
City-St-Zip: LOVELADIES, NJ 08008 US

Title: MGR () Delete
Name: GADDIS, ROBERT
Address: 7N441 FALCONS TRAIL
City-St-Zip: ST CHARLES, IL 60175 US

ADDITIONS/CHANGES:

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

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

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: ROBERT GADDIS

MM

05/01/2007

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