

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000000267

**FILED  
Mar 09, 2010  
Secretary of State**

**Entity Name:** ANGELA HEARL INSURANCE, LLC

**Current Principal Place of Business:**

2814 REMINGTON GREEN CIRCLE NE  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 13619  
TALLAHASSEE, FL 32317 US

**New Mailing Address:**

**FEI Number:** 26-0051855      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANTHONY, DORSEY  
2804 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 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  
**Name:** HEARL, ANGELA K MGR  
**Address:** 2814 REMINGTON GREEN CIRCLE NE  
**City-St-Zip:** TALLAHASSEE, FL 32308 US

I hereby 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: ANGELA HEARL      MGR      03/09/2010

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