

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004842

FILED
Jan 29, 2009
Secretary of State

Entity Name: ILLUSTRATED PROPERTIES INSURANCE, LLC

Current Principal Place of Business:

4259 NORTHLAKE BOULEVARD
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4259 NORTHLAKE BOULEVARD
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 06-1729125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CELEDINAS, KIM R
712 HARBOUR ISLES WAY
NORTH PALM BEACH, FL 33410 US

Name and Address of New Registered Agent:

CELEDINAS, RAY S
712 HARBOUR ISLES WAY
NORTH PALM BEACH, FL 33410 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: RAY S. CELEDINAS

01/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CELEDINAS, KIM R
Address: 4259 NORTHLAKE BLVD.
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: THE CELEDINAS AGENCY, , INC.
Address: 4259 NORTHLAKE BLVD.
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: RAY S. CELEDINAS

MGR

01/29/2009

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