

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L02000016326

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** MERRIMAC MARINE INSURANCE, LLC

**Current Principal Place of Business:**

1855 W STATE ROAD 434  
LONGWOOD, FL 32750

**New Principal Place of Business:**

124 E. COUNTY HIGHWAY 30A  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

1855 W STATE ROAD 434  
LONGWOOD, FL 32750

**New Mailing Address:**

1020 NORTH ORLANDO AVENUE SUITE 200  
MAITLAND, FL 32751

**FEI Number:** 02-0624547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES, TERRY L  
1830 ALAQUA LAKES BLVD  
LONGWOOD, FL 32779 US

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

NATIONAL CORPORATE RESEARCH, LTD  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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: KRISTIE TOLLIVER

02/08/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BOWEN MICLETTE & BRITT OF FLORIDA LLC  
Address: 124 E. COUNTY HIGHWAY 30A  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM  
Name: DUGAN, PAT  
Address: 124 E. COUNTY HIGHWAY #30A  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: LAWRENCE MICHAEL KARREN

CFO

02/08/2012

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