

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016559

FILED
Sep 05, 2006
Secretary of State

Entity Name: LEE HARVEY INSURANCE AGENCY, LLC

Current Principal Place of Business:

2110-C SOUTH ADAMS STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

2025 SOUTH MONROE ST
TALLAHASSEE, FL 32301

Current Mailing Address:

2110-C SOUTH ADAMS STREET
TALLAHASSEE, FL 32301

New Mailing Address:

2025 SOUTH MONROE ST
TALLAHASSEE, FL 32301

FEI Number: 04-3701647 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:

HARVEY, LEANDERS
2408 BANYAN DR
TALLAHASSEE, FL 32303 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: HARVEY, LEANDERS
Address: 2110 SO ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARVEY, LEANDERS
Address: 2025 SOUTH MONROE ST
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the 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: LEANDERS HARVEY

MGR

09/05/2006

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