2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# L02000033674

Entity Name: GAGLIARDI INSURANCE SERVICES, LLC

Current Principal Place of Business:

1101 BELCHER ROAD, SUITE #G
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

1101 BELCHER ROAD, SUITE #G
LARGO, FL 33771

New Mailing Address:

FEI Number: 02-0663777 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCEWEN, DAVID B ESQUIRE
100 FIRST AVENUE SOUTH, #340
ST. PETERSBURG, FL 33701 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/MEMBERS:

Title: MGRM ( ) Delete
Name: GAGLIARDI, JAMES A
Address: 1101 BELCHER ROAD, SUITE #G
City-St-Zip: LARGO, FL 99771

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES A GAGLIARDI MGRM 04/30/2004

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