

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008360

FILED
Feb 22, 2008
Secretary of State

Entity Name: THE OSCEOLA COUNTY INSURANCE GROUP LLC

Current Principal Place of Business:

3255 S JOHN YOUNG PARKWAY
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

3255 S JOHN YOUNG PARKWAY
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 57-1154231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIONFRIDDO, RICHARD J
3255 S JOHN YOUNG PARKWAY
KISSIMMEE, FL 34746 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: GIONFRIDDO, RICHARD J
Address: 3255 S JOHN YOUNG PARKWAY
City-St-Zip: KISSIMMEE, FL 34746

Title: MGR () Delete
Name: GIONFRIDDO, SHIRLEY A
Address: 3255 S JOHN YOUNG PARKWAY
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES:

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

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

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: RICHARD J GIONFRIDDO

MR.

02/22/2008

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