

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013528

FILED  
May 05, 2008  
Secretary of State

**Entity Name:** ASSURANCE INVESTMENTS, LLC

**Current Principal Place of Business:**

3208-C EAST COLONIAL DRIVE  
SUITE 176  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

3208-C EAST COLONIAL DRIVE  
SUITE 176  
ORLANDO, FL 32803 US

**New Mailing Address:**

FEI Number: 76-0731401      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:**

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

WEST, BARRY  
403 DIAL DRIVE  
ORLANDO, FL 32822 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WEST, WILLIAM B  
Address: 403 DIAL DRIVE  
City-St-Zip: ORLANDO, FL 32822 US

**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 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: BARRY WEST

MGR

05/05/2008

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