2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000028937

1. Entity Name

KLGN INSURANCE GROUP, L.L.C.



Principal Place of Business

18503 PINES BLVD

SIGNATURE:

SIGNATURE AND TYPED OR PRINT

SUITE 302

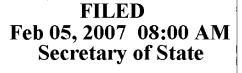
PEMBROKE PINES, FL 33029

Mailing Address

18503 PINES BLVD

SUITE 302

PEMBROKE PINES, FL 33029





01122007 No Chg-LLC

4. FEI Number 16-1680692 CR2E083 (11/05)

954-441-6000

Daytime Phone #

Applied For

Not Applicable

			5. Certificati	e of Status Desired	Fee Required
THEV	Name and Address of Current Registered Agent				
TILLEY, MICHAEL R 2000 GLADES ROAD SUITE 306 BOCA RATON, FL 33431			DO NOT WRITE IN THIS SPACE		
8. The above the obligat	e named entity submits this statement for the purpose of cha tions of registered agent.	inging its registere	d office or registered agent, or b	oth, in the State of Florida.	am familiar with, and accept
SIGNATURE			Agent signature required when reinstating)	DA	7E
F	lling Fee is \$50.00 ue by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME	P RIORDAN, GREGORY J			Haaaaa	204445
STREET ADDRESS	11852 RIDGEVIEW DRIVE			U000008	521443 30017-006 50.00
CITY-ST-ZIP	DAVIE, FL 33330			02/12/01~0	30017-006 50.0U
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the came legal effect as if made under oan; that I am a managing member or manager of the limited liability company or pie receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.