

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000029890

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** INSURANCE HOME OFFICE SERVICES, L.L.C.

**Current Principal Place of Business:**

7313 INTERNATIONAL PLACE  
SUITE 110  
SARASOTA, FL 34240

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 460  
SARASOTA, FL 34230

**New Mailing Address:**

**FEI Number:** 74-3102260

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORAN, JOHN A ESQ  
C/O DUNLAP & MORAN, P.A.  
22 SOUTH LINKS AVE., STE. 300  
SARASOTA, FL 34236 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  
Name: NEFF, RAY  
Address: 7217 PASADENA GLEN  
City-St-Zip: BRADENTON, FL 34202

I hereby 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: RAY NEFF

MGMR

04/14/2010

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