

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000034954

FILED
Jan 15, 2011
Secretary of State

Entity Name: FLOOD REBATE INSURANCE, LLC

Current Principal Place of Business:

964 S. WICKHAM RD
STE 102
WEST MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

PO BOX 939
MELBOURNE, FL 32902

New Mailing Address:

FEI Number: 11-3703952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANEW, BARRY
966 S. WICKHAM RD
STE 102
WEST MELBOURNE, FL 32904 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: MGRM
Name: RANEW, BARRY R
Address: 966 S. WICKHAM RD STE 102
City-St-Zip: WEST MELBOURNE, FL 32904

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: BARRY RANEW

MGRM

01/15/2011

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