

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040092

FILED
May 26, 2005
Secretary of State

Entity Name: ATLAS INSURANCE MARKETING, LLC

Current Principal Place of Business:

5509 GRAND BOULEVARD
SUITE 200
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

5509 GRAND BOULEVARD
SUITE 200
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 45-0525807 **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:

NELSON, CLINT R
5509 GRAND BOULEVARD
SUITE 200
NEW PORT RICHEY, FL 34652 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/MEMBERS:

Title: MGR () Delete
Name: NELSON, CLINT R
Address: 5509 GRAND BOULEVARD, SUITE 200
City-St-Zip: NEW PORT RICHEY, FL 34652 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 for the exemption stated in Section 119.07(3)(i), 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: CLINT R NELSON

MGR

05/26/2005

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