

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001574

FILED
Apr 27, 2007
Secretary of State

Entity Name: CORAL INSURANCE ADVISORS, LLC

Current Principal Place of Business:

4000 HOLLYWOOD BLVD., SUITE 285-S
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4000 HOLLYWOOD BLVD., SUITE 285-S
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 37-1481835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STRAKER-VIRTUE, SUSAN
2118 NE 15TH STREET
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

MEYERS, ROBERT K
4000 HOLLYWOOD BLVD., SUITE 285-S
HOLLYWOOD, FL 33021 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: ROBERT K. MEYERS

04/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARHAM, NORMAN
Address: 13782 MONACO WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR () Delete
Name: STRAKER-VIRTUE, SUSAN
Address: 2118 NE 15TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: MGR () Delete
Name: MEYERS, BERNARD M
Address: 3699 TOULOUSE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR () Delete
Name: LASALA, CHRISTINE
Address: 15 WEST 81ST STREET, APT. 14-C
City-St-Zip: NEW YORK, NY 10024

Title: MGR () Delete
Name: CARBINE, DAVID J
Address: 1040 SEMINOLE DR #1557
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: MEYERS, ROBERT K
Address: 243 WHITE OAK SHADE ROAD
City-St-Zip: NEW CANAAN, CT 06840

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: DAVID MENKEDICK

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04/27/2007

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