

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001574

FILED
Apr 17, 2009
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:

4000 HOLLYWOOD BLVD
SUITE 285 SOUTH
HOLLYWOOD, FL 33021

Current Mailing Address:

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

New Mailing Address:

4000 HOLLYWOOD BLVD
SUITE 285 SOUTH
HOLLYWOOD, FL 33021

FEI Number: 37-1481835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

MEYERS, ROBERT K
4000 HOLLYWOOD BLVD
SUITE 285 SOUTH
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

04/17/2009

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

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

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:

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: ROBERT K. MEYERS

MGR

04/17/2009

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