

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002808

FILED
Apr 11, 2011
Secretary of State

Entity Name: ENCOMPASS INSURANCE CONSULTANTS, LLC

Current Principal Place of Business:

113 NATURE WALK PARKWAY
SUITE 101
SAINT AUGUSTINE, FL 32092

New Principal Place of Business:

Current Mailing Address:

113 NATURE WALK PARKWAY
SUITE 101
SAINT AUGUSTINE, FL 32092 US

New Mailing Address:

FEI Number: 20-0321432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMERY, ALISON N
2700-C UNIVERSITY BLVD. WEST
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

INGALLS, LARRY
113 NATURE WALK PARKWAY
SUITE 101
SAINT AUGUSTINE, FL 32092 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: LARRY INGALLS

04/11/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P
Name: INGALLS, LARRY
Address: 113 NATURE WALK PARKWAY, SUITE 101
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: VP
Name: INGALLS, LINDA
Address: 113 NATURE WALK PARKWAY, SUITE 101
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

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: LARRY INGALLS

P

04/11/2011

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