

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055411

FILED
Jan 03, 2008
Secretary of State

Entity Name: CERTIFIED INSURANCE SERVICES, LLC

Current Principal Place of Business:

2636 W. ST. RD. 434
#112
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2636 W. ST. RD. 434
#112
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-1386618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIGELOW, DANA
375 DOUGLAS AVENUE
2007
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

BIGELOW, DANA
2636 WEST STATE RD 434
112
LONGWOOD, FL 32779 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:

01/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BIGELOW, DANA
Address: 1508 LUCKY PENNIE WAY
City-St-Zip: APOPKA, FL 32712 US

Title: MGRM () Delete
Name: HEMMING, GREGORY E
Address: 602 WOOD HOLLOW CT
City-St-Zip: APOPKA, FL 32712 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: HEMMING, GREGORY E
Address: 520 PRAKSID POINTE BLVD
City-St-Zip: APOPKA, FL 32712 US

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: DANA BIGELOW

MGRM

01/03/2008

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