

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065675

FILED
Mar 31, 2005
Secretary of State

Entity Name: CONSUMER SELECT INSURANCE, LLC

Current Principal Place of Business:

3410 HENDERSON BOULEVARD, SUITE 200
TAMPA, FL 33609

New Principal Place of Business:

1983 CENTRE POINTE BOULEVARD
TALLAHASSEE, FL 32308

Current Mailing Address:

3410 HENDERSON BOULEVARD, SUITE 200
TAMPA, FL 33609

New Mailing Address:

1983 CENTRE POINTE BOULEVARD
TALLAHASSEE, FL 32308

FEI Number: 20-1686343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CASTELLANO, NELSON T
2700 BANK OF AMERICA PLAZA
101 EAST KENNEDY BOULEVARD
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

LAJOIE, JOHN T
2075 CENTRE POINTE BOULEVARD
TALLAHASSEE, FL 32308 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: JOHN T. LAJOIE

03/31/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: FIRST AMERICAN TITLE, INSURANCE COMPANY
Address: 2075 CENTRE POINTE BOULEVARD
City-St-Zip: TALLAHASSEE, FL 32308

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: JOHN T. LAJOIE

VP

03/31/2005

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