

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069284

FILED
Apr 25, 2012
Secretary of State

Entity Name: SHIVER INSURANCE GROUP LLC

Current Principal Place of Business:

373 E. JEFFERSON STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

373 E. JEFFERSON STREET
QUINCY, FL 32351

New Mailing Address:

FEI Number: 20-1653362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, BARBARA A
372 DOGWOOD TRAIL
QUINCY, FL 32352 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: JOHNSON, BARBARA A
Address: 372 DOGWOOD TRAIL
City-St-Zip: QUINCY, FL 32352

Title: MGRM
Name: SHIVER, BOBBY J
Address: 713 W FRANKLIN
City-St-Zip: QUINCY, FL 32351

Title: MGRM
Name: BATTEN, DEWAYNE
Address: 5064 OLD BAINBRIDGE ROAD
City-St-Zip: TALLAHASSEE, FL 32303

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: BARBARA A JOHNSON

MGR

04/25/2012

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