2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 08, 2005
Secretary of State

DOCUMENT# L04000076857

Entity Name: LMS-SOUTH INSURANCE SERVICES INTERNATIONAL, LLC

Current Principal Place of Business:

THE FOREST OFFICE PARK
767 SOUTH STATE 7, SUITE 22A
MARGATE, FL 33068

New Principal Place of Business:

Current Mailing Address:

THE FOREST OFFICE PARK
767 SOUTH STATE 7, SUITE 22A
MARGATE, FL 33068

New Mailing Address:

FEI Number: 20-1748861 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BLODIG, GREGORY J
100 W CYPRESS PARK, SUITE 700
FORT LAUDERDALE, FL 33309 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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES ( ) Change (X) Addition
Name: MARTONE, JR, JOHN A PRES
Address: 14 MANOR DRIVE
City-St-Zip: EAST STROUDSBURG, PA 18301 US

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 A MARTONE, JR. PRES 09/08/2005

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