

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084316

FILED
Feb 08, 2005
Secretary of State

Entity Name: BELL INSURANCE AGENCY OF CLEARWATER, LLC

Current Principal Place of Business:

4445 E BAY DR #312
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

4445 E BAY DR #312
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 20-1906789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HETZEL, TARA
35246 US HWY 19 N #311
PALM HARBOR, FL 34684 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/MEMBERS:

Title: MGR () Delete
Name: VORACHACK, SOUVANNALY
Address: 4445 E BAY DR #312
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES:

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

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: SOUVANNALY VORACHACK

MGR

02/08/2005

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