

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 07, 2011
Secretary of State

Entity Name: INSURANCE MARKET PLACE, LLC

Current Principal Place of Business:

8200 113TH STREET NORTH
SUITE 203
SEMINOLE, FL 33772

New Principal Place of Business:

1301 NE 14TH STREET
OCALA, FL 34470

Current Mailing Address:

8200 113TH STREET NORTH
SUITE 203
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 20-1942249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTSELLE, ART
8200 113TH STREET NORTH
SUITE 201
SEMINOLE, FL FL 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: MGRM
Name: SCARR, INC., A FLORIDA CORPORATION
Address: 8200 113TH STREET NORTH, SUITE 202
City-St-Zip: SEMINOLE, FL 33772

Title: MGRM
Name: HARTSELLE, INC., A FLORIDA CORPORATION
Address: 8200 113TH STREET NORTH, SUITE 201
City-St-Zip: SEMINOLE, FL 33772

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: ART HARTSELLE

MGRM

04/07/2011

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