#### **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

SIGNATURE:

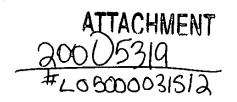
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGINE

#### Feb 06, 2006 8:00 am **Secretary of State DOCUMENT # L05000031512** 02-06-2006 90173 008 \*\*\*\*50.00 1. Entity Name EDISON INSURANCE GROUP, LLC Principal Place of Business Mailing Address **400000010** 1715 MONROE STREET 1715 MONROE STREET FORT MYERS, FL 33901 FORT MYERS, FL 33901 2. Principal Place of Business 3. Mailing Address 9800 4th Street 9800 4th Street North Suite, Apt. #, etc. Suite, Apt. #, etc. 01302006 CR2E083 (11/05) Chg-LLC 301 307 City & State St. Peters! 4. FEI Number Applied For City & State 20-2727644 Not Applicable Country Zip \$5.00 Additional Zip 5. Certificate of Status Desired 3<u>3702</u> USA Fee Required <u>33702</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WHITESMAN, GUY E Street Address (P.O. Box Number is Not Acceptable) 1715 MONROE STREET Insurance FORT MYERS, FL 33901 # 307 Street North Zip Code 3370み 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Make check payable to Fillng Fee is \$50.00 Due by May 1, 2006 Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME refer to attachment STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP - Delete TITLE Change ☐ Addition TITLE -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

FILED

888.328.5171

Dayuma Phone #



### 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

### **DOCUMENT #L05000031512**

# **EDISON INSURANCE GROUP, LLC**

## Managing Members/Managers

| TITLE          | P/D                       | □ Change □ Addition |
|----------------|---------------------------|---------------------|
| NAME           | David M. Howard           | 5                   |
| STREET ADDRESS | 4717 Royal Palm Circle NE |                     |
| CITY-ST-ZIP    | St. Petersburg, FL 33703  |                     |
| TITLE          | S/D                       | □ Change □ Addition |
| NAME           | Kelly K. King             |                     |
| STREET ADDRESS | 1421 Sturbridge Court     |                     |
| CITY-ST-ZIP    | Dunedin, FL 34698         |                     |
| TITLE          | D                         | □ Change □ Addition |
| NAME           | Robert G. Gantley         |                     |
| STREET ADDRESS | 2307 89th Street NW       |                     |
| CITY-ST-ZIP    | Bradenton, FL 34209       |                     |
| TITLE          | D                         | □ Change □ Addition |
| NAME           | John Belisle              |                     |
| STREET ADDRESS | 766 Cal Cove Drive        |                     |
| CITY-ST-ZIP    | Fort Myers, FL 33919      |                     |
| TITLE          | D                         | ☐ Change ☐ Addition |
| NAME           | Douglas G. Fields         |                     |
| STREET ADDRESS | 2938 Medinah              |                     |
| CITY-ST-ZIP    | Weston, FL 33332          |                     |
| TITLE          | D                         | ☐ Change ☐ Addition |
| NAME           | Charles K. Idelson        |                     |
| STREET ADDRESS | 13792 Pine Villa Lane     |                     |
| CITY-ST-ZIP    | Fort Myers, FL 33912-1618 |                     |
| TITLE          | D                         | ☐ Change ☐ Addition |
| NAME           | James W. Moore            |                     |
| STREET ADDRESS | 867 Cypress Lake Circle   |                     |
| CITY-ST-ZIP    | Fort Myers, FL 33919      |                     |
| TITLE          | D                         | ☐ Change ☐ Addition |
| NAME           | John M. Pollock           |                     |
| STREET ADDRESS | 3533 Stuart Court         |                     |
| CITY-ST-ZIP    | Fort Myers, FL 33919      |                     |
| TITLE          | D                         | ☐ Change ☐ Addition |
| NAME           | Steven C. Shimp           | _                   |
| STREET ADDRESS | 822 Cypress Lake Circle   |                     |
| CITY-ST-ZIP    | Fort Myers, FL 33919-1622 |                     |
| TITLE          | D                         | ☐ Change ☐ Addition |
| NAME           | Gary V. Trippe            |                     |
| STREET ADDRESS | 1275 Kasamada Drive       |                     |
| CITY-ST-ZIP    | Fort Myers, FL 33919-1622 |                     |