

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032688

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: FIRST HOME INSURANCE AGENCY, LLC

## Current Principal Place of Business:

4500 SALISBURY ROAD STE 100  
C/O GLENCOE CAPITAL, LLC  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

4500 SALISBURY ROAD STE 100  
SUITE, 100  
JACKSONVILLE, FL 32216

## Current Mailing Address:

4500 SALISBURY ROAD STE 100  
C/O GLENCOE CAPITAL, LLC  
JACKSONVILLE, FL 32216

## New Mailing Address:

FEI Number: 20-2634733      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEFLER, MICHAEL W  
FIRST HOME INS CO  
4500 SALISBURY RD  
JACKSONVILLE, FL 32216 US

## Name and Address of New Registered Agent:

LEFLER, MICHAEL W  
4500 SALISBURY RD  
SUITE, 100  
JACKSONVILLE, FL 32216 US

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: W. MICHAEL LEFLER

04/14/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete  
Name: LEFLER, MICHAEL W  
Address: 4500 SALISBURY ROAD STE 100  
City-St-Zip: JACKSONVILLE, FL 32216

Title: V ( ) Delete  
Name: KURDUCKI, STEPHEN  
Address: 4500 SALISBURY ROAD STE 100  
City-St-Zip: JACKSONVILLE, FL 32216

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: LEFLER, MICHAEL W  
Address: 4500 SALISBURY ROAD SUITE, 100  
City-St-Zip: JACKSONVILLE, FL 32216

Title: V (X) Change ( ) Addition  
Name: MARTIN, NEWBY  
Address: 4500 SALISBURY ROAD STE 100  
City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARTIN NEWBY

V

04/14/2009

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