

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035364

Entity Name: SGB INSURANCE, LLC

FILED
Aug 22, 2006
Secretary of State

Current Principal Place of Business:

2850 N. ANDREWS AVE
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

2850 N. ANDREWS AVENUE
FT. LAUDERDALE, FL 33311

Current Mailing Address:

2850 N. ANDREWS AVE
FT. LAUDERDALE, FL 33311

New Mailing Address:

2850 N. ANDREWS AVENUE
FT. LAUDERDALE, FL 33311

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

BROWN, SHELBY
2850 N. ANDREWS AVE
FT. LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

BROWN, SHELBY G
2850 N. ANDREWS AVENUE
FT. LAUDERDALE, FL 33311 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: SHELBY G. BROWN

08/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BROWN, SHELBY
Address: 2850 N. ANDREWS AVE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: MGR () Delete
Name: WARDELL, PHILLIP M
Address: 2850 N. ANDREWS AVE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: MGR () Delete
Name: SARDUY, JOSEPH E
Address: 2850 N. ANDREWS AVE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BROWN, SHELBY G
Address: 2850 N. ANDREWS AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: MGR (X) Change () Addition
Name: WARDELL, PHILLIP M
Address: 2850 N. ANDREWS AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: MGR (X) Change () Addition
Name: SARDUY, JOSEPH E
Address: 2850 N. ANDREWS AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SHELBY G. BROWN

MGRM

08/22/2006

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