

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Mar 04, 2009
Secretary of State**

DOCUMENT# L05000038392

Entity Name: BIRD INSURANCE GROUP, LLC

Current Principal Place of Business:

20156 E. PENNSYLVANIA AVE.
DUNNELLON, FL 34432

New Principal Place of Business:

Current Mailing Address:

20156 E. PENNSYLVANIA AVE.
DUNNELLON, FL 34432

New Mailing Address:

FEI Number: 20-2704990 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRD, DAVID W
2080 NE 44TH STREET
OCALA, FL 34479 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: MGR () Delete
Name: BIRD, DAVID W
Address: 2080 NE 44TH STREET
City-St-Zip: Ocala, FL 34479

Title: MGR () Delete
Name: BIRD, MARY C
Address: 2950 SE STATE ROAD 326
City-St-Zip: GULF HAMMOCK, FL 32635

ADDITIONS/CHANGES:

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

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

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: DAVID BIRD MGR 03/04/2009

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