2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# L05000065924

Entity Name: JY INSURANCE, LLC

Current Principal Place of Business:

5453 CENTRAL AVENUE
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

PO BOX 4192
ST. PETERSBURG, FL 33731

New Mailing Address:

FEI Number: 20-3106008 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KARNIEWICZ, JUDY
1312 W. FLETCHER AVENUE, SUITE B
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

KARNIEWICZ, JUDY
1406 W. FLETCHER AVENUE
TAMPA, FL 33612 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: 04/24/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: YANCHUCK, JOEL P MANAGER
Address: PO BOX 4192
City-St-Zip: ST PETERSBURG, FL 33731

ADDITIONS/CHANGES:

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: JOEL P. YANCHUCK MRGM 04/24/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date