2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Feb 04, 2008
Secretary of State

DOCUMENT# L05000072223

Entity Name: ALL LINES INSURANCE ASSOCIATES, LLC

Current Principal Place of Business:

2500 NORTH MILITARY TRL
SUITE 275
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2500 NORTH MILITARY TRL
SUITE 275
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-3190316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEISS, STEVEN P
17224 NORTHWAY CIRCLE
BOCA RATON, FL 33496 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: MGRM ( ) Delete
Name: WEISS, STEVEN P
Address: 17224 NORTHWAY CIRCLE
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM ( ) Delete
Name: GELLER, MATTHEW M
Address: 2400 E COMMERCIAL BLVD STE 825
City-St-Zip: FORT LAUDERDALE, FL 33496

Title: MGRM ( ) Delete
Name: RODRIQUEZ, EDMUNDO
Address: 2400 E COMMERCIAL BLVD STE 825
City-St-Zip: FORT LAUDERDALE, FL 33496

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

Title: MGRM ( ) Change (X) Addition
Name: DIGIORGIO, ANTHONY JR
Address: 2500 N MILITARY TRAIL STE 275
City-St-Zip: BOCA RATON, FL 33431

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: ANTHONY DIGIORGIO MGRM 02/04/2008

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