2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000099227

Address:

City-St-Zip:

Entity Name: COMMUNITY INSURANCE GROUP, LLC

FORT LAUDERDALE, FL 33308 US

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 28801 SW 157TH AVE 305 HOMESTEAD, FL 33033 **New Mailing Address: Current Mailing Address:** 28801 SW 157TH AVE HOMESTEAD, FL 33033 US FEI Number: 20-3621852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JENKINS, WALTER III THE ACCOUNTING DEPARTMENT OF THE SOUTHEAST 1436 NE 40TH RD 1440 CORAL RIDGE DR HOMESTEAD, FL 33033 US CORAL SPRINGS, FL 33071 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: WM PAUL BUNNELL 04/30/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HENRY, DOUGLAS P Name: Name: Address: 1436 NE 40TH RD Address: City-St-Zip: HOMESTEAD, FL 33033 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JENKINS, WALTER III Name: Address: 1436 NE 40TH RD Address: City-St-Zip: HOMESTEAD, FL 33033 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DTRT INSURANCE, Name: Name: 2400 E COMMERCIAL BLVD SUITE 825

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.

Address:

City-St-Zip:

SIGNATURE: WALTER JENKINS **MGRM** 04/30/2006