## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110839

Entity Name: MILLENIA INSURANCE AGENCY, LLC

FILED May 01, 2006 Secretary of State

4700 MILLENIA BOULEVARD, SUITE 320 ORLANDO, FL 32839

**Current Mailing Address: New Mailing Address:** 

4700 MILLENIA BOULEVARD, SUITE 320 ORLANDO, FL 32839

FEI Number: 57-1226367 FEI Number Applied For ( ) FEI Number Not Applicable ( ) 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: Name and Address of New Registered Agent:

SHEPARD, CLIFFORD B 111 S. MAITLAND AVENUE MAITLAND, FL 32794

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

ADDITIONS/CHANGES:

## MANAGING MEMBERS/MANAGERS:

MGRM Title:

( ) Delete (X) Change ( ) Addition MCINTYRE, M. SUSAN MCINTYRE, M. SUSAN Name: Name:

Address: 11230 LAKE BUTLER BOULEVARD Address: 11230 LAKE BUTLER BOULEVARD City-St-Zip: WINDERMERE, FL 32819 City-St-Zip: WINDERMERE, FL 34786

Title: () Delete Title: MGRM ( ) Change (X) Addition

Name: Name: MCINTYRE, MICHAEL Address: Address:

11230 LAKE BUTLER BOULEVARD City-St-Zip: City-St-Zip: WINDERMERE, FL 34786

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: SUSAN MCINTYRE **MGRM** 05/01/2006