

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000112244

FILED
Jun 03, 2009
Secretary of State

Entity Name: SCOTT HARDCASTLE INSURANCE AGENCY, LLC

Current Principal Place of Business:

105 W. SUMMIT ST
WAUCHULA, FL 33873 US

New Principal Place of Business:

628 EDGEBROOK LANE
WEST PALM BEACH, FL 33411 US

Current Mailing Address:

628 EDGEBROOK LANE
WEST PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: 20-3880752 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:

HARDCASTLE, SCOTT
628 EDGEBROOK LANE
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

HARDCASTLE, SCOTT J PRES
628 EDGEBROOK LANE
WEST PALM BEACH, FL 33411 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: SCOTT HARDCASTLE

06/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: HARDCASTLE, SCOTT
Address: 628 EDGEBROOK LANE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP () Delete
Name: HARDCASTLE, SHARON
Address: 628 EDGEBROOK LANE
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: HARDCASTLE, SCOTT J PRES
Address: 628 EDGEBROOK LANE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP (X) Change () Addition
Name: HARDCASTLE, SHARON M VPRES
Address: 628 EDGEBROOK LANE
City-St-Zip: WEST PALM BEACH, FL 33411

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: SHARON HARDCASTLE

VP

06/03/2009

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