2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# L05000122553

Entity Name: MGA PROPERTY & CASUALTY INSURANCE AGENCY, LLC

Current Principal Place of Business:

9024 TOWN CENTER PARKWAY
LAKEWOOD RANCH, FL 34202

New Principal Place of Business:

Current Mailing Address:

9024 TOWN CENTER PARKWAY
LAKEWOOD RANCH, FL 34202

New Mailing Address:

FEI Number: 20-4086776 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSTARD, R DAVID
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: MGR ( ) Delete
Name: MARINACCIO, LOUIS E
Address: 13407 BLYTHEFIELD TERRACE
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: MGRM ( ) Delete
Name: MARINACCIO, ANN MARIE
Address: 13407 BLYTHEFIELD TERRACE
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: MGR ( ) Delete
Name: REAGAN, RONALD
Address: 6108 CYPRESS CIRCLE
City-St-Zip: BRADENTON, FL 34202

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:

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: ANN MARIE MARINACCIO MGRM 01/21/2009

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