2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2008
Secretary of State

DOCUMENT# L06000005723

Entity Name: TRI COUNTY INSURANCE COMPANY, LLC

Current Principal Place of Business:

13710 U. S. HIGHWAY 441
SUITE 100
THE VILLAGES, FL 32159

New Principal Place of Business:

Current Mailing Address:

13710 U. S. HIGHWAY 441
SUITE 100
THE VILLAGES, FL 32159

New Mailing Address:

FEI Number: 20-4123793 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLHORN, MICHAEL
13710 U. S. HIGHWAY 441
SUITE 100
THE VILLAGES, FL 32159 US

Name and Address of New Registered Agent:

MILLHORN, MICHAEL D
13710 U. S. HIGHWAY 441
SUITE 100
THE VILLAGES, FL 32159 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: MICHAEL D. MILLHORN 04/17/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MILLHORN, MICHAEL
Address: 13710 U. S. HIGHWAY 441
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MILLHORN, MICHAEL D
Address: 13710 U. S. HIGHWAY 441, SUITE 100
City-St-Zip: LADY LAKE, FL 32159

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: MICHAEL D. MILLHORN MGRM 04/17/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date