

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029479

FILED
May 16, 2007
Secretary of State

Entity Name: CNB&T INSURANCE SERVICES, LLC

Current Principal Place of Business:

1201 S ORLANDO AVE, SUITE 380
C/O COMBS INSURANCE AGENCY
WINTER PARK, FL 32789

New Principal Place of Business:

1201 S ORLANDO AVE, SUITE 410
C/O COMBS INSURANCE AGENCY
WINTER PARK, FL 32789

Current Mailing Address:

1201 S ORLANDO AVE, SUITE 380
C/O COMBS INSURANCE AGENCY
WINTER PARK, FL 32789

New Mailing Address:

1201 S ORLANDO AVE, SUITE 410
C/O COMBS INSURANCE AGENCY
WINTER PARK, FL 32789

FEI Number: 20-4542502 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:

KILLGORE, FRANK H JR.
2 SOUTH ORANGE AVENUE, 5TH FLOOR
KILLGORE, PEARLMAN, STAMP
ORLANDO, FL 32801 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: MGRM () Delete
Name: COMBS INSURANCE AGEN, CY
Address: 1201 S ORLANDO AVE, SUITE 380
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COMBS INSURANCE AGEN, CY
Address: 1201 S ORLANDO AVE, SUITE 410
City-St-Zip: WINTER PARK, FL 32789

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: MARK COMBS

MGRM

05/16/2007

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