

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000032486

FILED
Apr 20, 2011
Secretary of State

Entity Name: GALT INSURANCE GROUP OF BROWARD COUNTY, LLC

Current Principal Place of Business:

9363 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

9363 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 20-4598639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALT, CHRISTIAN R
7955 AIRPORT ROAD NORTH
204
NAPLES, FL 34109 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
Name: GALT, CHRISTIAN R
Address: 7955 AIRPORT ROAD NORTH #204
City-St-Zip: NAPLES, FL 34109 US

I hereby 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: CHRISTIAN GALT

PRES

04/20/2011

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