2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2012
Secretary of State

DOCUMENT# L06000060570

Entity Name: INSURANCENTER, LLC

Current Principal Place of Business:

15051 S TAMIAMI TRAIL, STE 205
FORT MYERS, FL 33908

New Principal Place of Business:

16591 S TAMIAMI TRL
FORT MYERS, FL 33908

Current Mailing Address:

15051 S TAMIAMI TRAIL, STE 205
FORT MYERS, FL 33908

New Mailing Address:

16591 S TAMIAMI TRL
FORT MYERS, FL 33908

FEI Number: 75-3253591 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELLANS, WILLIAM K
15051 S TAMIAMI TRAIL, STE 205
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

NELLANS, WILLIAM K
16591 S TAMIAMI TRL
FORT MYERS, FL 33908 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: _____ 01/31/2012

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: NELLANS, WILLIAM K
Address: 15051 S TAMIAMI TRAIL, STE 205
City-St-Zip: FORT MYERS, FL 33908

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 Statues.

SIGNATURE: WILLIAM K NELLANS MGRM 01/31/2012

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