

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000084285

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** THE ARNOLD INSURANCE GROUP LLC

**Current Principal Place of Business:**

2831 OAKLAND PARK BLVD EAST  
SUITE 9  
FORT LAUDERDALE, FL 33306 US

**New Principal Place of Business:**

975 6TH AVENUE SOUTH  
105  
NAPLES, FL 34102 US

**Current Mailing Address:**

PO BOX 480729  
FORT LAUDERDALE, FL 33306

**New Mailing Address:**

PO BOX 3489  
NAPLES, FL 34102

**FEI Number:** 20-5455057

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ARNOLD, RICHARD N  
2747 NE 14TH ST.  
FORT LAUDERDALE, FL 33304 US

**Name and Address of New Registered Agent:**

ARNOLD, RICHARD N  
1250 TUNA COURT  
NAPLES, FL 34102 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: RICHARD N ARNOLD

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ARNOLD, RICHARD N  
Address: 1250.  
City-St-Zip: NAPLES, FL 34102 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: RICHARD ARNOLD

PRES

01/04/2012

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