## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085419

Entity Name: COMMERCIAL SPECIALTY INSURANCE, LLC

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9422 BALM RIVERVIEW ROAD RIVERVIEW, FL 33569 US

Current Mailing Address: New Mailing Address:

9422 BALM RIVERVIEW ROAD RIVERVIEW, FL 33569 US

FEI Number: 20-5475076 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RICHARDS, SHELIA L
4165 BUTTON BUSH CIRCLE
LAKELAND, FL 33811 US

RICHARDS, SHELIA L
9422 BALM RIVERVIEW RD
RIVERVIEW, FL 33569 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: SHELIA L RICHARDS 01/09/2009

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RICHARDS, SHELIA L
Address: 4165 BUTTON BUSH CIRCLE
City-St-Zip: LAKELAND, FL 33811 US

Title: MGRM (X) Delete
Name: RICHARDS, CHARLES
Address: 4165 BUTTON BUSH CIRCLE

LAKELAND, FL 33811 US

City-St-Zip:

Title: MGRM (X) Change ( ) Addition

Name: RICHARDS, SHELIA L
Address: 9422 BALM RIVERVIEW RD
City-St-Zip: RIVERVIEW, FL 33569 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

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: SHELIA L RICHARDS MGR 01/09/2009