

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 26, 2010
Secretary of State

Entity Name: ZION INSURANCE GROUP, LLC

Current Principal Place of Business:

5310 LENOX AVENUE
SUITE 6
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

5310 LENOX AVENUE
SUITE 6
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 20-3788865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELLAMY, YOLANDA D
6697 RAPID RIVER DRIVE
JACKSONVILLE, FL 32218 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: VP
Name: TOWNSEND, FRANK L III
Address: 5310 LENOX AVEUNUE #6
City-St-Zip: JACKSONVILLE, FL 32205

Title: P
Name: TOWNSEND, EARNESTEEN
Address: 5310 LENOX AVUENUE #6
City-St-Zip: JACKSONVILLE, FL 32244

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: EARNESTEEN TOWNSEND

PRES

04/26/2010

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