

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000110714

**FILED**  
**Mar 17, 2012**  
**Secretary of State**

**Entity Name:** SDT INSURANCE AGENCY, LLC

**Current Principal Place of Business:**

9350 BAY PLAZA BLVD.  
SUITE 120  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

9350 BAY PLAZA BLVD.  
SUITE 120  
TAMPA, FL 33619 US

**New Mailing Address:**

380 NORTH BROADWAY SUITE 400.  
JERICO, NY 11753 US

**FEI Number:** 20-5895067

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARRIOS, SAIDA L  
9350 BAY PLAZA BLVD.  
SUITE 120  
TAMPA, FL 33619 US

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

DERHAM, TIMOTHY  
9350 BAY PLAZA BLVD.  
SUITE 120  
TAMPA, FL 33619 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: TIMOTHY DERHAM

03/17/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DERHAM, TIMOTHY  
Address: 380 NORTH BROADWAY, SUITE 400  
City-St-Zip: JERICO, NY 11753 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: TIMOTHY DERHAM

MGR

03/17/2012

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