2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117737

Entity Name: SUPER INSURANCE OF SOUTH WEST FLORIDA LLC

FILED Apr 14, 2009 Secretary of State

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

3333 RENAISSANCE BLVD, SUITE 203 9250 CORKSCREW RD BONITA SPRINGS, FL 34134 US SUITE 8

ESTERO, FL 33928 US

Current Mailing Address: New Mailing Address:

3333 RENIASSANCE BLVD.

SUITE 203

BONITA SPRINGS, FL 34134 US

9250 CORKSCREW RD
SUITE 8
ESTERO, FL 33928 US

FEI Number: 13-4363716 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:

MURPHY, CAROL A
3333 RENAISSANCE BLVD.
SUITE 203
MURPHY, CAROL A
9377 LAKE ABBY LANE
BONITA SPRINGS, FL 34135 US

BONITA SPRINGS, FL 34135 US BONITA SPRINGS, FL 34134 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: 04/14/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 MURPHY, STEVE F
 Name:
 MURPHY, STEVE F

 Address:
 3333 RENAISSANCE BLVD SUITE 203
 Address:
 9250 CORKSCREW RD SUITE *

 City-St-Zip:
 BONITA SPRINGS, FL 34134 US
 City-St-Zip:
 ESTERO, FL 33928 US

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: STEPHEN MURPHY MGR 04/14/2009