

2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000118556

FILED
Apr 08, 2011
Secretary of State

Entity Name: FOCUS INSURANCE SERVICES, LLC

Current Principal Place of Business:

1300 SAWGRASS CORP PKWY
SUITE 300
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

1300 SAWGRASS CORP PKWY
SUITE 300
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 20-8542484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLOWAY, AMY J
110 SE 6TH STREET
15TH FLOOR
FORT LAUDERDALE, FL 33301 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: MGRC
Name: BULLINGTON, DOUGLAS W
Address: 1300 SAWGRASS CORP PKWY, SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: MGRP
Name: TROMER, KEVIN M
Address: 1300 SAWGRASS CORP PKWY, SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: S
Name: TERZER, RONALD
Address: 1300 SAWGRASS CORP PKWY, SUITE 300
City-St-Zip: SUNRISE, FL 33323

Title: TCFO
Name: BLAKE, JAMES W JR
Address: 1300 SAWGRASS CORP PKWY, STE 300
City-St-Zip: SUNRISE, FL 33323

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: RONALD TERZER

S

04/08/2011

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