

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118784

FILED
Mar 19, 2010
Secretary of State

Entity Name: WILLIAMS INSURANCE SERVICES, LLC

Current Principal Place of Business:

200 EAST ROBINSON STREET
SUITE 1180
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

200 EAST ROBINSON STREET
SUITE 1180
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 20-8055874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWMAN, WILLIAM R JR
1000 LEGION PLACE, STE 1700
ORLANDO, FL 32801 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: MGR
Name: WILLIAMS, DARYL B
Address: 200 E ROBINSON STREET, SUITE 1180
City-St-Zip: ORLANDO, FL 32801

Title: MGR
Name: WILLIAMS, TOBEY JR.
Address: 200 E ROBINSON ST, SUITE 1180
City-St-Zip: ORLANDO, FL 32801

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: DARYL WILLIAMS

MGR

03/19/2010

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