

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000013952

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** HRITZ INSURANCE & CONSULTING, LLC

**Current Principal Place of Business:**

20061 BARLETTA LANE  
2626  
ESTERO, FL 33928

**New Principal Place of Business:**

**Current Mailing Address:**

20061 BARLETTA LANE  
2626  
ESTERO, FL 33928

**New Mailing Address:**

**FEI Number:** 29-4724934

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HRITZ, MARK E  
20061 BARLETTA LANE  
#2626  
ESTERO, FL 33928 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: MR  
Name: HRITZ, MARK E  
Address: 20061 BARLETTA LANE #2626  
City-St-Zip: ESTERO, FL 33928

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: MARK HRITZ

MR

03/14/2011

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