

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000016999

FILED
Feb 15, 2011
Secretary of State

Entity Name: VADAS INSURANCE SERVICES LLC

Current Principal Place of Business:

1218 DEL PRADO BLVD S #B
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

1218 DEL PRADO BLVD S #B
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 26-3164954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VADAS, PAMELA D
1218 DEL PRADO BLVD S #B
CAPE CORAL, FL 33990 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: MGRM
Name: VADAS, PAMELA D
Address: 3719 SW 20TH PL
City-St-Zip: CAPE CORAL, FL 33914

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: PAMELA D. VADAS

MGRM

02/15/2011

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