

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000016999

FILED
Feb 07, 2012
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: 26-3164955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: 1233 SE 22ND PL
City-St-Zip: CAPE CORAL, FL 33990

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 VADAS

MGR

02/07/2012

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