## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000023471

Entity Name: DEBI MACOMBER INSURANCE SERVICES, LLC

FILED Mar 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1329 TALL OAK
DELAND, FL 32720
1125 STILLWATER
DELAND, FL 32720
DELAND, FL 32720

Current Mailing Address: New Mailing Address:

1329 TALL OAK 1125 STILLWATER DELAND, FL 32720 DELAND, FL 32720

FEI Number: 20-8513802 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MACOMBER, DEBI MACOMBER, DEBI 1329 TALL OAK 1125 STILLWATER DELAND, FL 32720 US DELAND, FL 32720 US

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: DEBI MACOMBER 03/09/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 MACOMBER, DEBI
 Name:
 MACOMBER, DEBI

 Address:
 1329 TALL OAK
 Address:
 1125 STILLWATER

 City-St-Zip:
 DELAND, FL 32720
 City-St-Zip:
 DELAND, FL 32720

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DEBI MACOMBER PRES 03/09/2009