

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000044255

FILED
May 14, 2009
Secretary of State

Entity Name: NEIGHBOR FIRST INSURANCE LLC

Current Principal Place of Business:

1220 SOUTH DIXIE HWY
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

1220 SOUTH DIXIE HWY
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: 51-0632968 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LAURENT, CHREJENEVE T
1220 S. DIXIE HWY
LAKE WORTH, FL, FL 33460 US

Name and Address of New Registered Agent:

LAURENT, CHREJENEVE T
1220 S. DIXIE HWY
LAKE WORTH,, FL 33460 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: LAURENT CHREJENEVE

05/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: D () Delete
Name: LAURENT, CHREJENEVE T
Address: 1220 S. DIXIE HWY
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LAURENT CHREJENEVE

M

05/14/2009

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