

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000044287

FILED  
Feb 17, 2012  
Secretary of State

**Entity Name:** JOMAR & ASSOCIATES INSURANCE AGENCY LLC

**Current Principal Place of Business:**

2753 STATE ROAD 580  
SUITE 205A  
CLEARWATER, FL 33761

**New Principal Place of Business:**

29750 U.S. HIGHWAY 19 N  
203  
CLEARWATER, FL 33761

**Current Mailing Address:**

2753 STATE ROAD 580  
SUITE 205A  
CLEARWATER, FL 33761

**New Mailing Address:**

P.O. BOX 2407  
OLDSMAR, FL 34677

FEI Number: 26-0321626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARCIANO, STEVEN  
2753 STATE ROAD 580  
SUITE 205A  
CLEARWATER, FL 33761 US

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

MARCIANO, STEVEN  
29750 U.S. HIGHWAY 19 N  
SUITE 203  
CLEARWATER, FL 33761 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: STEVEN MARCIANO

02/17/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MARCIANO, STEVEN  
Address: 29750 U.S. HIGHWAY 19 N, SUITE 203  
City-St-Zip: CLEARWATER, FL 33761

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: STEVEN MARCIANO

MGRM

02/17/2012

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