2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2012
Secretary of State

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Entity Name: CENTRAL FLORIDA INSURANCE AGENCY, LLC

Current Principal Place of Business:

601 N. ASHLEY DRIVE
SUITE 200
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

601 N. ASHLEY DRIVE
SUITE 200
TAMPA, FL 33602

New Mailing Address:

FEI Number: 20-8991841 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POE, CHARLES E
601 N. ASHLEY DRIVE
SUITE 200
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

SALYER, TANI
601 N. ASHLEY DRIVE
SUITE 200
TAMPA, FL 33602 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: TANI SALYER 04/19/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LUNSKIS, TIMOTNY P
Address: 8 BAHAMA CIRCLE
City-St-Zip: TAMPA, FL 33606

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 Statues.

SIGNATURE: TIMOTHY P. LUNSKIS MGRM 04/19/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date