

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048418

FILED
Apr 05, 2012
Secretary of State

Entity Name: CONNELL INSURANCE SERVICES LLC

Current Principal Place of Business:

24830 S TAMIAMI TRAIL
SUITE 1200
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

24830 S TAMIAMI TRAIL
SUITE 1200
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 26-0155005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNELL, THOMAS E MEMBER
20249 COUNTRY CLUB DRIVE
ESTERO, FL 33928 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: CONNELL, THOMAS E
Address: 20249 COUNTRY CLUB DRIVE
City-St-Zip: ESTERO, FL 33928

Title: MGRM
Name: CONNELL, ANDREA B
Address: 20249 COUNTRY CLUB DRIVE
City-St-Zip: ESTERO, FL 33928

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: ANDREA B. CONNELL

MGRM

04/05/2012

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