2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 23, 2008
Secretary of State

DOCUMENT# L07000072872

Entity Name: YOUR CHOICE INSURANCE SERVICES LLC

Current Principal Place of Business:

318 SE 15TH AVE
DEERFIELD BEACH, FL 33414

New Principal Place of Business:

Current Mailing Address:

318 SE 15TH AVE
DEERFIELD BEACH, FL 33414

New Mailing Address:

FEI Number: 26-0503401 **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:

SHANNA, BAUMAN
318 SE 15TH AVE
DEERFIELD BEACH, FL 33414 US

Name and Address of New Registered Agent:

SHANNA, BAUMAN
318 SE 15TH AVE
DEERFIELD BEACH, FL 33441 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: SHANNA BAUMAN 05/23/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BAUMAN, SHANNA M
Address: 1732 S CONGRESS AVE #300
City-St-Zip: LAKE WORTH, FL 33461 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BAUMAN, SHANNA M
Address: 318 SE 15TH AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33441 US

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: SHANNA BAUMAN MGR 05/23/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date