

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083332

Entity Name: JLM INSURANCE SERVICES LLC

FILED
Jan 18, 2009
Secretary of State

Current Principal Place of Business:

3294 MERLOT DRIVE
LAKELAND, FL 33811

New Principal Place of Business:

6155 S FLORIDA AVE
SUITE 9
LAKELAND, FL 33813

Current Mailing Address:

3294 MERLOT DRIVE
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 26-0646753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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 () Delete
Name: MOORE, JESSICA L
Address: 3294 MERLOT DRIVE
City-St-Zip: LAKELAND, FL 33811

Title: MGRM () Delete
Name: MOORE, LARRY V JR.
Address: 3294 MERLOT DRIVE
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES:

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

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: LARRY V MOORE JR

MGRM

01/18/2009

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