

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098123

FILED
Jan 07, 2010
Secretary of State

Entity Name: RESPONSIVE PREMIUM FINANCE LLC

Current Principal Place of Business:

18459 PINES BLVD., #318
PEMBROKE PINES, FL 33029

New Principal Place of Business:

8151 PETERS ROAD
SUITE 1000
PLANTATION, FL 33324

Current Mailing Address:

18459 PINES BLVD., #318
PEMBROKE PINES, FL 33029

New Mailing Address:

8151 PETERS ROAD
SUITE 1000
PLANTATION, FL 33324

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR
Name: STEWART, PHILIP MR.
Address: 8151 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: MGR
Name: FRITZ, WILLIAM MR.
Address: 8151 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: MGR
Name: COX JR., JOHN MR.
Address: 8151 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: MGR
Name: MACHUL, JOHN MR.
Address: 8151 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: MGR
Name: AROCHO, VICTOR MR.
Address: 8151 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

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: JOHN D. MACHUL

MGR

01/07/2010

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