

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000106997

FILED  
Feb 26, 2010  
Secretary of State

**Entity Name:** ASSURESIGN, LLC

**Current Principal Place of Business:**

220 E. CENTRAL PKWY, STE 3000  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

220 E. CENTRAL PKWY, STE 3000  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number: 26-1816210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRINKMAN, DAVID W  
220 E. CENTRAL PKWY, STE 3000  
ALTAMONTE SPRINGS, FL 32701 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: COMBS, DALE  
Address: 220 E. CENTRAL PKWY, STE 3000  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGR  
Name: BRINKMAN, DAVID  
Address: 220 E. CENTRAL PKWY, STE 3000  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: DAVID BRINKMAN

MGR

02/26/2010

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