

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000109346

FILED
Apr 04, 2008
Secretary of State

Entity Name: JUST RIDE INSURANCE LLC

Current Principal Place of Business:

816 EXECUTIVE DRIVE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

816 EXECUTIVE DRIVE
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 74-3238827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AM&E SERVICES LLC
605 EAST ROBINSON STREET, SUITE 730
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

TBS BUSINESS SERVICES
226 SHADY OAKS CIRCLE
LAKE MARY, FL 32746 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: BARBARA A TANZER

04/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: ATKINS, JOHN E
Address: 2521 KILDARE DRIVE
City-St-Zip: CHULUOTA, FL 32766

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: BARBARA A TANZER

RA

04/04/2008

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