

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000121759

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: OPTIMUM INSURANCE MARKETING NETWORK, LLC

## Current Principal Place of Business:

1525 NW 3RD STREET STE 8  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

9825 WEST SAMPLE RD  
207  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

1525 NW 3RD STREET STE 8  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

9825 WEST SAMPLE RD  
207  
CORAL SPRINGS, FL 33065

FEI Number: 26-1587742

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOTOCKI, CHARLES J  
1525 NW 3RD STREET STE 8  
DEERFIELD BEACH, FL 33442 US

## Name and Address of New Registered Agent:

LOTOCKI, CHARLES J  
9825 WEST SAMPLE RD.  
207  
CORAL SPRINGS, FL 33065 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:

04/29/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LOTOCKI, CHARLES J  
Address: 1525 NW 3RD STREET STE 8  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGR ( ) Delete  
Name: PASSMAN, HOWARD B  
Address: 1525 NW 3RD STREET STE 8  
City-St-Zip: DEERFIELD BEACH, FL 33442

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LOTOCKI, CHARLES J  
Address: 9825 WEST SAMPLE RD #207  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR (X) Change ( ) Addition  
Name: PASSMAN, HOWARD B  
Address: 9825 WEST SAMPLE RD. #207  
City-St-Zip: CORAL SPRINGS, FL 33065

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: CHARLES J. LOTOCKI

MGR

04/29/2009

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