

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000123585

FILED
Jan 09, 2012
Secretary of State

Entity Name: FOCUS INSURANCE PARTNERS, LLC

Current Principal Place of Business:

2019 CENTRE POINT BLVD.
SUITE 102
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

PO BOX 15283
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 61-1553141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICKER, ROBERT L
2019 CENTRE POINT BLVD.
SUITE 102
TALLAHASSEE, FL 32308 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
Name: RICKER, ROBERT L
Address: P.O. BOX 15283
City-St-Zip: TALLAHASSEE, FL 32317

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: ROBERT L. RICKER

MR.

01/09/2012

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