

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000000065

FILED
Apr 20, 2011
Secretary of State

Entity Name: OMEGA FINANCIAL SERVICES & INSURANCE, LLC

Current Principal Place of Business:

18 CYPRESS DR
PALM HARBOR, FL 34684 US

New Principal Place of Business:

Current Mailing Address:

18 CYPRESS DR
PALM HARBOR, FL 34684 US

New Mailing Address:

FEI Number: 26-1658800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACKWELL, JAMES E
18 CYPRESS DR
PALM HARBOR, FL 34684 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: BLACKWELL, JAMES E
Address: 18 CYPRESS DR
City-St-Zip: PALM HARBOR, FL 34684 US

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: JAMES E BLACKWELL

MGR

04/20/2011

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