

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000014054

FILED
Apr 07, 2009
Secretary of State

Entity Name: INTERNATIONAL INSURANCE AGENCY LLC

Current Principal Place of Business:

14550 GLEN COVE DRIVE
702
FORT MYERS, FL 33919

New Principal Place of Business:

6371-4 PRESIDENTIAL CT
FORT MYERS, FL 33919

Current Mailing Address:

14550 GLEN COVE DRIVE
702
FORT MYERS, FL 33919

New Mailing Address:

6371-4 PRESIDENTIAL CT
FORT MYERS, FL 33919

FEI Number: 26-1937605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGNES, BUERCKMANN
14550 GLEN COVE DRIVE
702
FORT MYERS, FL, FL 33919 US

Name and Address of New Registered Agent:

AGNES, BUERCKMANN
5003 SW 5TH PL
CAPE CORAL, FL 33914 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:

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BUERCKMANN, AGNES
Address: 14550 GLEN COVE DRIVE, #702
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BUERCKMANN, AGNES
Address: 5003 SW 5TH PL
City-St-Zip: CAPE CORAL, FL 33914

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: AGNES BUERCKMANN

MGR

04/07/2009

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