

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000021367

FILED
May 21, 2009
Secretary of State

Entity Name: TALON INSURANCE SERVICES, LLC.

Current Principal Place of Business:

3637 MADACA LANE
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

18538 KINGBIRD DR
LUTZ, FL 33558 US

New Mailing Address:

FEI Number: 26-2048471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ATTKINS, CARL
18538 KINGBIRD DR
LUTZ, FL 33558 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 () Delete
Name: ATTKINS, CARL
Address: 18538 KINGBIRD DR.
City-St-Zip: LUTZ, FL 33558 US

Title: MGRM () Delete
Name: STECHMANN, JEFFREY
Address: 15416 CARRILLON ESTATES BLVD.
City-St-Zip: TAMPA, FL 33625 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ATTKINS, CARL H
Address: 18538 KINGBIRD DR.
City-St-Zip: LUTZ, FL 33558 US

Title: MGRM (X) Change () Addition
Name: STECHMANN, JEFFREY N
Address: 19422 SANDY SPRINGS CIRCLE
City-St-Zip: LUTZ, FL 33558 US

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: JEFFREY N. STECHMANN

MGRM

05/21/2009

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