

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030391

FILED
May 02, 2010
Secretary of State

Entity Name: ACCH INSURANCE AGENCY, LLC

Current Principal Place of Business:

455 NW PRIMA VISTA BLVD
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

455 NW PRIMA VISTA BLVD
PORT SAINT LUCIE, FL 34983

New Mailing Address:

FEI Number: 74-3250348 **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:

Name and Address of New Registered Agent:

A, HAYLE
455 NW PRIMA VISTA BLVD
PORT SAINT LUCIE, FL 34983 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: A, HAYLE
Address: 455 NW PRIMA VISTA BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34983

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: AHAYLE MGR 05/02/2010

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