

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000036981

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** INTERNATIONAL ASSETS INSURANCE ADVISORS, LLC

**Current Principal Place of Business:**

300 S. ORANGE AVENUE  
SUITE 1100  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

300 S. ORANGE AVENUE  
SUITE 1100  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WINN, JEFFREY  
300 S. ORANGE AVENUE  
SUITE 1100  
ORLANDO, FL 32801 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: WINN, JEFFREY  
Address: 300 S. ORANGE AVENUE, ST. 1100  
City-St-Zip: ORLANDO, FL 32801 US

Title: MGRM  
Name: COFRANCESCO, EDWARD  
Address: 300 S. ORANGE AVENUE, ST 1100  
City-St-Zip: ORLANDO, FL 32801 US

Title: MGRM  
Name: PANCHOOKIAN, RICHARD  
Address: 300 S. ORANGE AVENUE, ST 1100  
City-St-Zip: ORLANDO, FL 32801 US

Title: MGRM  
Name: CUFF, SHERI  
Address: 300 S. ORANGE AVENUE, ST 1100  
City-St-Zip: ORLANDO, FL 32801 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: JEFFREY WINN

MRG

02/22/2010

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