

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039286

FILED
Apr 30, 2009
Secretary of State

Entity Name: KREMER INSURANCE GROUP PL

Current Principal Place of Business:

524 WINDING WILLOW DR.
PALM HARBOR, FL 34683 US

New Principal Place of Business:

Current Mailing Address:

524 WINDING WILLOW DR.
PALM HARBOR, FL 34683 US

New Mailing Address:

FEI Number: 59-3335396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KREMER, LORI
524 WINDING WILLOW DR.
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

KREMER, LORI MGRM
524 WINDING WILLOW DR.
PALM HARBOR, FL 34683 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: LORI KREMER

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KREMER, LORI
Address: 524 WINDING WILLOW DR.
City-St-Zip: PALM HARBOR, FL 34683 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LORI KREMER

MGRM

04/30/2009

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