

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Apr 01, 2010
Secretary of State**

DOCUMENT# L08000039981

Entity Name: GATOR INSURE, LLC

Current Principal Place of Business:

New Principal Place of Business:

10533 GREENSPRINGS DR
TAMPA, FL 33626

Current Mailing Address:

New Mailing Address:

10533 GREENSPRINGS DR
TAMPA, FL 33626

FEI Number: 26-2362712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PILECKI, DEREK
10533 GREENSPRINGS DR
TAMPA, FL 33626 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: MGRM
Name: PILECKI, DEREK
Address: 10533 GREENSPRINGS DR
City-St-Zip: TAMPA, FL 33626

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: DEREK PILECKI MGRM 04/01/2010

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