

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041285

FILED
Jan 13, 2009
Secretary of State

Entity Name: FUSSELL INSURANCE AND BENEFITS, LLC

Current Principal Place of Business:

1007 NORTH FEDERAL HIGHWAY
SUITE F8
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1007 NORTH FEDERAL HIGHWAY
SUITE F8
FT. LAUDERDALE, FL 33304 US

New Mailing Address:

1007 NORTH FEDERAL HIGHWAY
SUITE F8
FT. LAUDERDALE, FL 33304

FEI Number: 26-2565444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAM J. ANDERSON, P.A.
101 NE 3RD AVE.
SUITE1500
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

FUSSELL, TIMOTHY R MGRM
1007 N FEDERAL HWY
SUITE F8
FT. LAUDERDALE, FL 33304 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: TIMOTHY R FUSSELL

01/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FUSSELL, TIMOTHY R
Address: 1007 NORTH FEDERAL HIGHWAY, STE. F8
City-St-Zip: FT. LAUDERDALE, FL 33304 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: TIMOTHY R FUSSELL

MGRM

01/13/2009

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