

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053530

FILED
Jul 10, 2009
Secretary of State

Entity Name: PABLO BEACH INSURANCE GROUP, LLC

Current Principal Place of Business:

13500 SUTTON PARK DRIVE S #801
JACKSONVILLE, FL 32224

New Principal Place of Business:

13500 SUTTON PARK DRIVE S #801
SUITE 801
JACKSONVILLE, FL 32224

Current Mailing Address:

13500 SUTTON PARK DRIVE S #801
JACKSONVILLE, FL 32224

New Mailing Address:

13500 SUTTON PARK DRIVE S #801
SUITE 801
JACKSONVILLE, FL 32224

FEI Number: 20-2731085 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:

COLEMAN, C RANDOLPH
9250 BAYMEADOWS ROAD STE 450
JACKSONVILLE, FL US

Name and Address of New Registered Agent:

MURPHY, EMILY
13500 SUTTON PARK DR S
SUITE 801
JACKSONVILLE, FL 32224 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: EMILY A MURPHY

07/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MURPHY, SHAUN
Address: 13500 SUTTON PARK DRIVE S #801
City-St-Zip: JACKSONVILLE, FL 32224

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: EMILY A MURPHY

CFO

07/10/2009

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