

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062248

FILED
Jun 23, 2009
Secretary of State

Entity Name: INSURANCE AND BENEFITS CONSULTING GROUP, LLC

Current Principal Place of Business:

1628 SW 25TH LANE
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

1628 SW 25TH LANE
CAPE CORAL, FL 33914 US

New Mailing Address:

FEI Number: 26-3130803 **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:

Name and Address of New Registered Agent:

SAUERBERG, ERIC M
200 VILLAGE SQUARE CROSSING
SUITE 102
PALM BEACH GARDENS, FL 33410 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: MGR () Delete
Name: CLAVIN, DONNA M
Address: 1628 SW 25TH LANE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGR () Delete
Name: ZALENSKI, JOSEPH
Address: 1628 SW 25TH LANE
City-St-Zip: CAPE CORAL, FL 33914 US

ADDITIONS/CHANGES:

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

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: JOSEPH ZELENSKI

MM

06/23/2009

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