

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062292

FILED
Feb 16, 2010
Secretary of State

Entity Name: HODGINS INSURANCE AGENCY LLC

Current Principal Place of Business:

850 NW FEDERAL HWY STE 205
STUART, FL 34994 US

New Principal Place of Business:

850 NW FEDERAL HWY
STE 111
STUART, FL 34994 US

Current Mailing Address:

850 NW FEDERAL HWY STE 205
STUART, FL 34994 US

New Mailing Address:

850 NW FEDERAL HWY
STE 111
STUART, FL 34994 US

FEI Number: 20-5798816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HODGINS, CHRISTOPHER R
850 NW FEDERAL HWY STE 205
STUART, FL 34994 US

Name and Address of New Registered Agent:

HODGINS, CHRISTOPHER R
850 NW FEDERAL HWY
STE 111
STUART, FL 34994 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

02/16/2010

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HODGINS, CHRISTOPHER R
Address: 4440 SW HAGAPLAN STREET
City-St-Zip: PORT ST LUCIE, FL 34953 US

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: CHRISTOPHER R HODGINS

MGRM

02/16/2010

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