

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000094296

FILED
Apr 08, 2009
Secretary of State**Entity Name:** MILESTONE INSURANCE GROUP L.L.C.**Current Principal Place of Business:**13019 YARDSLEY CT
ORLANDO, FL 32837**New Principal Place of Business:**7550 FUTURES DR
301
ORLANDO, FL 32819**Current Mailing Address:**13019 YARDSLEY CT
ORLANDO, FL 32837**New Mailing Address:**7550 FUTURES DR
301
ORLANDO, FL 32819**FEI Number:** 80-0277487**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MILES, DONALD A
13019 YARDSLEY CT
ORLANDO, FL 32837 US**Name and Address of New Registered Agent:**MILES, DONALD A
7550 FUTURES DR
301
ORLANDO, FL 32819 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: DONALD MILES

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGR () Delete
Name: MILES, DONALD A
Address: 13019 YARDSLEY CT
City-St-Zip: ORLANDO, FL 32837Title: MGRM () Delete
Name: JAMES, FADRA
Address: 447 LARK COURT
City-St-Zip: KISSIMMEE, FL 34759**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: DONALD MILES

MGR

04/08/2009

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