

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109358

FILED
Apr 11, 2012
Secretary of State

Entity Name: DARR SCHACKOW INSURANCE AGENCY, LLC

Current Principal Place of Business:

5200-B W. NEWBERRY RD.
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

5200-B W. NEWBERRY RD.
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 26-3772160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DARR, JOHN M IV
5200-B W. NEWBERRY RD.
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

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: MGRM
Name: DARR, JOHN M IV
Address: 5200-B W. NEWBERRY RD.
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM
Name: SCHACKOW, RAYMOND S
Address: 5200-B W. NEWBERRY RD.
City-St-Zip: GAINESVILLE, FL 32607

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: JOHN M. DARR IV

MGRM

04/11/2012

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