

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000006958

FILED
Mar 05, 2010
Secretary of State

Entity Name: GULF COAST INSURANCE, LLC

Current Principal Place of Business:

7795 DAVIS BOULEVARD, SUITE 205
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

7795 DAVIS BOULEVARD, SUITE 205
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3664838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALVATORI & WOOD, P.L.
TAMIAMI TRAIL NORTH, SUITE 330
NAPLES, FL 34103 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: MGR
Name: DORIA, ALBERT JR.
Address: 7795 DAVIS BOULEVARD, SUITE 205
City-St-Zip: NAPLES, FL 34104

Title: MGR
Name: DORIA, MARIO
Address: 7795 DAVIS BOULEVARD, SUITE 205
City-St-Zip: NAPLES, FL 34104

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: ALBERT DORIA, JR

MGR

03/05/2010

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