

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000016749

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Entity Name:** EMERALD COAST INSURANCE SERVICES OF PANAMA CITY, L.L.C.

**Current Principal Place of Business:**

2003 EAST AVE  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

2003 EAST AVE  
PANAMA CITY, FL 32405

**New Mailing Address:**

**FEI Number:** 26-4291279

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRYANT, ROWLETT W  
833 HARRISON AVE  
PANAMA CITY, FL 32401 US

**Name and Address of New Registered Agent:**

ALLEN, HERMAN E  
2003 EAST AVE  
PANAMA CITY, FL 32405 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: ALLEN E HERMAN

03/03/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HERMAN, ALLEN  
Address: 2003 EAST AVE  
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM  
Name: BISHOP, TORRI  
Address: 2003 EAST AVE  
City-St-Zip: PANAMA CITY, FL 32405

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: ALLEN E HERMAN

MGRM

03/03/2011

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