

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000022266

FILED  
Mar 18, 2010  
Secretary of State

Entity Name: BOUCHARD FLOOD INSURANCE, LLC

**Current Principal Place of Business:**

101 STARCREST DRIVE  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6090  
CLEARWATER, FL 33758

**New Mailing Address:**

FEI Number: 26-4417411

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REEVES, MICHAEL J  
101 E. KENNEDY BOULEVARD, STE 2700  
TAMPA, FL 33602 US

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

TK REGISTERED AGENT, INC.  
101 E. KENNEDY BOULEVARD  
SUITE 2700  
TAMPA, FL 33602 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: MICHAEL J. REEVES

03/18/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: BOUCHARD, JOHN R  
Address: 2421 BUTTERNUT COURT  
City-St-Zip: DUNEDIN, FL 34698

Title: CEO  
Name: BISHOP, DOUG  
Address: 5307 CLOUDS PEAK DRIVE  
City-St-Zip: LUTZ, FL 33558

Title: ST  
Name: ELSEY, MATT  
Address: 2740 WESTCHESTER DRIVE SOUTH  
City-St-Zip: CLEARWATER, FL 33761

Title: D  
Name: MCWHIRTER, P. TODD  
Address: 101 STARCREST DRIVE  
City-St-Zip: CLEARWATER, FL 33765

Title: D  
Name: WELCH, JEFF  
Address: 2241 RISING CREEK COURT  
City-St-Zip: DUNEDIN, FL 34698

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: MATT ELSEY

S

03/18/2010

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