

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000024238

**FILED**  
**Jan 25, 2010**  
**Secretary of State**

**Entity Name:** BLESSING INSURANCE MANAGEMENT, LLC

**Current Principal Place of Business:**

7200 RIDGE ROAD  
7-B  
PORT RICHEY, FL 34668 US

**Current Mailing Address:**

7200 RIDGE ROAD  
7-B  
PORT RICHEY, FL 34668 US

**New Principal Place of Business:**

7200 RIDGE ROAD  
7  
PORT RICHEY, FL 34668 US

**New Mailing Address:**

7200 RIDGE ROAD  
7  
PORT RICHEY, FL 34668 US

**FEI Number:** 26-4463811

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLESSING, KELLY P  
7200 RIDGE ROAD  
7-B  
PORT RICHEY, FL 34668 US

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

BLESSING, KELLY P  
7200 RIDGE ROAD  
7  
PORT RICHEY, FL 34668 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:

01/25/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BLESSING, BENJIE B  
Address: 7200 RIDGE ROAD, SUITE #7  
City-St-Zip: PORT RICHEY, FL 34668 US

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: BENJIE B BLESSING

MGRM

01/25/2010

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