

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000026529

Entity Name: COTTER INSURANCE, LLC

FILED
Jan 09, 2012
Secretary of State

Current Principal Place of Business:

11560-6 OLD ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

11560-6 OLD ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 26-4481155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTER, CHRISTOPHER C
5137 JULINGTON CREEK RD
JACKSONVILLE, FL 32258 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: COTTER, CHRISTOPHER C
Address: 11560-6 OLD ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGR
Name: COTTER, WILLIAM J
Address: 11560-6 OLD ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258 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: CHRISTOPHER C COTTER

MGR

01/09/2012

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