

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000028485

FILED
Apr 29, 2010
Secretary of State

Entity Name: BOSTON INSURANCE AGENCY LLC

Current Principal Place of Business:

3111 W. DR. M.L.K. BLVD. STE 100
TAMPA, FL 33607

New Principal Place of Business:

2202 N. WEST SHORE BOULEVARD
SUITE 200
TAMPA, FL 33607

Current Mailing Address:

PO BOX 4088
TAMPA, FL 33677

New Mailing Address:

FEI Number: 80-0363592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOSTON, BRUCE
3111 W. DR. M.L.K. BLVD. STE 100
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

BOSTON, BRUCE MRG
2901 CORK ROAD
PLANT CITY, FL 33565 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: BRUCE BOSTON

04/29/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BOSTON, BRUCE
Address: 2901 CORK ROAD
City-St-Zip: PLANT CITY, FL 33565

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: BRUCE BOSTON

MGR

04/29/2010

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