

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 05, 2011
Secretary of State

Entity Name: GOODLAD GROUP INSURANCE SERVICES, LLC

Current Principal Place of Business:

704 LEELAND HEIGHTS BLVD W
LEHIGH ACRES, FL 33936

New Principal Place of Business:

704 LEELAND HEIGHTS BLVD W
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

704 LEELAND HEIGHTS BLVD W
LEHIGH ACRES, FL 33936

New Mailing Address:

704 LEELAND HEIGHTS BLVD W
LEHIGH ACRES, FL 33936 US

FEI Number: 27-0178459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINNEY, LANCE M
3783 SEAGO LN
FORT MYERS, FL 33901 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: MGRM
Name: GOODLAD, JOHN
Address: 5268 FT DENAUD RD
City-St-Zip: LABELLE, FL 33935

Title: MGRM
Name: GOODLAD, TYLER
Address: 12790 ASTON OAKS DR
City-St-Zip: FT MYERS, FL 33912

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: JOHN GOODLAD

MGRM

01/05/2011

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