

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000070351

FILED
Feb 25, 2011
Secretary of State

Entity Name: MULTISOURCE INSURANCE SERVICES, LLC

Current Principal Place of Business:

5901 BROKEN SOUND PARKWAY
400
BOCA RATON, FL 33487 FL

New Principal Place of Business:

Current Mailing Address:

5901 BROKEN SOUND PARKWAY
400
BOCA RATON, FL 33487 FL

New Mailing Address:

FEI Number: 27-0598726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A.R.S. AND ASSOCIATES INC
20810 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180 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: BAIZAN, CHERYL
Address: 5901 BROKEN SOUND PARKWAY #400
City-St-Zip: BOCA RATON, FL 33487 US

Title: MGR
Name: BAIZAN, GABRIEL
Address: 5901 BROKEN SOUND PARKWAY #400
City-St-Zip: BOCA RATON, FL 33487 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: BAIZAN, CHERYL

MGR

02/25/2011

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