

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000071241

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** SEBOLI'S AUTO INSURANCE, LLC

**Current Principal Place of Business:**

4349 10TH AVE. N  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

4349 10TH AVE. N  
LAKE WORTH, FL 33461

**New Mailing Address:**

**FEI Number:** 80-0447557

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOUYON, SERGE  
5329 BUCKHEAD CIRCLE  
BOCA RATON, FL 33486 US

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

DOUYON, SERGE  
1616 NW 4 ST  
BOCA RATON, FL 33486 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: SERGE DOUYON

03/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DOUYON, SERGE  
Address: 1616 NW 4 ST  
City-St-Zip: BOCA RATON, FL 33486

Title: MGR  
Name: DOUYON, STEPHANIE  
Address: 1616 NW 4 ST  
City-St-Zip: BOCA RATON, FL 33486

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: SERGE DOUYON

MGR

03/04/2010

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