

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000079048

FILED
Aug 22, 2010
Secretary of State

Entity Name: MAIN STREAM INSURANCE USA LLC

Current Principal Place of Business:

5911 SHELDON ROAD
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

5911 SHELDON ROAD
TAMPA, FL 33615

New Mailing Address:

FEI Number: 27-0744221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POST, DAVID G
5911 SHELDON ROAD
TAMPA, FL 33615 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: POST, DAVID G
Address: 5911 SHELDON ROAD
City-St-Zip: TAMPA, FL 33615

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: DAVID POST

MGRM

08/22/2010

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