

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000080332

FILED
Mar 01, 2010
Secretary of State

Entity Name: LEHN & GROTHER INSURANCE LLC

Current Principal Place of Business:

2119 CHARLESTON PARK DR
NORTH PORT, FL 34287

New Principal Place of Business:

1357 S MCCALL RD SUITE 4
PORT CHARLOTTE, FL 33981

Current Mailing Address:

2119 CHARLESTON PARK DR
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: 27-0767689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHN, TRACY G
2119 CHARLESTON PARK DR
NORTH PORT, FL 34287 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: LEHN, TRACY
Address: 2119 CHARLESTON PARK DR
City-St-Zip: NORTH PORT, FL 34287

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: TRACY G LEHN

OWNE

03/01/2010

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