

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000088809

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** ENDEAVOUR INSURANCE PARTNERS, LLC

**Current Principal Place of Business:**

100 SECOND AVENUE SOUTH, STE. 300N  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

100 SECOND AVENUE SOUTH, STE. 104N  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

100 SECOND AVENUE SOUTH, STE. 300N  
ST. PETERSBURG, FL 33701

**New Mailing Address:**

100 SECOND AVENUE SOUTH, STE. 104N  
ST. PETERSBURG, FL 33701

**FEI Number:** 27-0924671

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZITMAN, CHRISTINE  
100 SECOND AVENUE SOUTH, STE. 300N  
ST. PETERSBURG, FL 33701 US

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

ZITMAN, CHRISTINE  
100 SECOND AVENUE SOUTH, STE. 104N  
ST. PETERSBURG, FL 33701 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: CHRISTINE ZITMAN

04/27/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ELDRED, MICAH  
Address: 100 SECOND AVENUE SOUTH, STE. 104N  
City-St-Zip: ST PETERSBURG, FL 33701

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: MICAH ELDRED

MGR

04/27/2010

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