2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 14, 2010
Secretary of State

DOCUMENT# L09000097209

Entity Name: AUTO ACCIDENT INFORMATION CENTER, LLC

Current Principal Place of Business:

24830 S. TAMIAMI TRAIL, STE. 100
BONITA SPRINGS, FL

New Principal Place of Business:

24830 S. TAMIAMI TRAIL
SUITE #1100
BONITA SPRINGS, FL 34134

Current Mailing Address:

24830 S. TAMIAMI TRAIL, STE. 100
BONITA SPRINGS, FL

New Mailing Address:

24830 S. TAMIAMI TRAIL
SUITE #1100
BONITA SPRINGS, FL 34134

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, CHARLES C II ESQ
1633 SE 47TH TERRACE
CAPE CORAL, FL 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: MERLO, DOUGLAS DR
Address: 24830 S. TAMIAMI TRAIL, STE. 1100
City-St-Zip: BONITA SPRINGS, FL 34134

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 Statues.

SIGNATURE: DOUG MERLO PRES 07/14/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date