

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 29, 2010
Secretary of State

Entity Name: PHYSICIANS PROFESSIONAL INSURANCE AGENCY, LLC

Current Principal Place of Business:

1001 S. 22ND COURT
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

1001 S. 22ND COURT
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MEADVIN, HARVEY I
1001 S. 22ND COURT
HOLLYWOOD, FL 33020 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HARVEY, MEADVIN I
Address: 1001 S. 22ND COURT
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGR
Name: JUDITH, MEADVIN R
Address: 1001 S. 22ND COURT
City-St-Zip: HOLLYWOOD, FL 33020

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: HARVEY I MEADVIN

MGRM

04/29/2010

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