

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000120000

FILED
Feb 17, 2010
Secretary of State

Entity Name: INSURANCE ADVISORY PARTNERS LLC

Current Principal Place of Business:

2111 E. MICHIGAN STREET
SUITE 200
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

2111 E. MICHIGAN STREET
SUITE 200
ORLANDO, FL 32806 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MARKHAM, BARBARA
2111 E. MICHIGAN STREET
SUITE 200
ORLANDO, FL 32806 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: MARKHAM, BARBARA
Address: 2111 E. MICHIGAN STREET, SUITE 200
City-St-Zip: ORLANDO, FL 32806 US

Title: MGRM
Name: SLEIMAN, JOSEPH E
Address: 2111 E. MICHIGAN STREET, SUITE 200
City-St-Zip: ORLANDO, FL 32806

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: BARBARA MARKHAM RA 02/17/2010

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