

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000120766

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Entity Name:** SQUID INSURANCE MARKETING, LLC

**Current Principal Place of Business:**

4700 MILLENIA BLVD., SUITE 410  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

4700 MILLENIA BLVD., SUITE 410  
ORLANDO, FL 32839

**New Mailing Address:**

**FEI Number:** 27-1347746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMARAL, JOE  
11326 BRONSON ROAD  
CLERMONT, FL 34711 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:** DEGRAIDE, ADAM D  
**Address:** 9720 NEARWATER PLACE  
**City-St-Zip:** WINDERMERE, FL 34786

**Title:** MGR  
**Name:** SAWYER, TIMOTHY C  
**Address:** 16 PLEASANT RUN  
**City-St-Zip:** SAUNDERSTOWN, RI 02874

**Title:** MGR  
**Name:** BOUDREAU, JOHN H  
**Address:** 34 MARDEN STREET  
**City-St-Zip:** CRANSTON, RI 02910

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:** JOHN H. BOUDREAU

MGR

01/14/2010

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