

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000012693

FILED
Apr 04, 2011
Secretary of State

Entity Name: CAREY INSURANCE AGENCY, LLC

Current Principal Place of Business:

1147 SE 36TH AVE
OCALA, FL 34471

New Principal Place of Business:

2226 E. SILVER SPRINGS BLVD.
E
OCALA, FL 34470

Current Mailing Address:

1147 SE 36TH AVE
OCALA, FL 34471

New Mailing Address:

P.O. BOX 3713
OCALA, FL 34478

FEI Number: 27-2085040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAREY, MICHAEL
1147 SE 36TH AVE
OCALA, FL 34471 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: CAREY, MICHAEL
Address: 1147 SE 36TH AVE
City-St-Zip: Ocala, FL 34471

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: MICHAEL CAREY

MGRM

04/04/2011

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