

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000015387

FILED
Apr 30, 2011
Secretary of State

Entity Name: TCB INSURANCE SOLUTIONS LLC

Current Principal Place of Business:

12023 TUSCANY BAY DR
APT 303
TAMPA, FL 33626

New Principal Place of Business:

2636 BREWTON
APT 303
TAMPA, FL 33626

Current Mailing Address:

12023 TUSCANY BAY DR
APT 303
TAMPA, FL 33626

New Mailing Address:

PO BOX 149
OLDSMAR, FL 34677

FEI Number: 27-0537212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BYRD, TERRANCE C
12023 TUSCANY BAY DR
APT 303
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

BYRD, TERRANCE C
2636 BRETWON CT
CLEARWATER, FL 33761 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: TERRANCE C. BYRD

04/30/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BYRD, TERRANCE C
Address: 12023 TUSCANY BAY DR APT 303
City-St-Zip: TAMPA, FL 33626

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: TERRANCE C. BYRD

MGR

04/30/2011

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