

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000024336

FILED
Mar 23, 2011
Secretary of State

Entity Name: SANDSPRIT INSURANCE LLC

Current Principal Place of Business:

816 E. OCEAN BLVD.
B
STUART, FL 34994

New Principal Place of Business:

924 SE CENTRAL PARKWAY
107
STUART, FL 34994

Current Mailing Address:

PO BOX 795
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 27-1928191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACQUARRIE, DUNCAN R
816 E. OCEAN BLVD.
B
STUART, FL 34994 US

Name and Address of New Registered Agent:

MACQUARRIE, DUNCAN R
1417 SE SUNSHINE AVENUE
PORT ST. LUCIE, FL 34957 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: DUNCAN MACQUARRIE

03/23/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MACQUARRIE, DUNCAN R
Address: 1417 SE SUNSHINE AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34952

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: DUNCAN MACQUARRIE

MGRM

03/23/2011

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