

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000028053

FILED
Apr 11, 2012
Secretary of State

Entity Name: CENTRAL FLORIDA INSURANCE ASSOCIATES, LLC

Current Principal Place of Business:

1103 LYNX TRAIL
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

1103 LYNX TRAIL
WINTER SPRINGS, FL 32708

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:

GRIFFIN, KEVIN M
1103 LYNX TRAIL
WINTER SPRINGS, FL 32708 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: GRIFFIN, KEVIN M
Address: 1103 LYNX TRAIL
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGR
Name: BARRY, PAUL
Address: 1506 N. GREENLEAF COURT
City-St-Zip: WINTER SPRINGS, FL 32708

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: KEVIN M. GRIFFIN

MGR

04/11/2012

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