

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000032183

FILED
Apr 08, 2012
Secretary of State

Entity Name: MMS PARTNERS IN INSURANCE, LLC

Current Principal Place of Business:

514 SW 3RD ST
CAPE CORAL, FL 33991

New Principal Place of Business:

1136 NE PINE ISLAND RD
82
CAPE CORAL, FL 33909 US

Current Mailing Address:

514 SW 3RD ST
CAPE CORAL, FL 33991

New Mailing Address:

PO BOX 151180
CAPE CORAL, FL 33915 US

FEI Number: 27-2203012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUARTE, MARLENE
514 SW 3RD ST
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

DUARTE, MARLENE
1136 NE PINE ISLAND RD
82
CAPE CORAL, FL 33909 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: MARLENE DUARTE

04/08/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DUARTE, MARLENE
Address: 1136 NE PINE ISLAND RD
City-St-Zip: CAPE CORAL, FL 33909

Title: MGRM
Name: KRIDER, THAD L
Address: 1136 NE PINE ISLAND RD
City-St-Zip: CAPE CORAL, FL 33909

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: MARLENE DUARTE

MGRM

04/08/2012

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