

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000053258

FILED
Jan 05, 2011
Secretary of State

Entity Name: SHANKLE INSURANCE SERVICES LLC

Current Principal Place of Business:

1360 SOUTH PATRICK DR.
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

PO BOX 411666
MELBOURNE, FL 32941

New Mailing Address:

PO BOX 372723
SATELLITE BEACH, FL 32937

FEI Number: 27-2617760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANKLE, PATRICA
1360 S. PATRICK DR.
SATELLITE BEACH, FL 32937 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: SHANKLE, PATRICIA
Address: 1360 S. PATRICK DR.
City-St-Zip: SATELLITE BEACH, FL 32937

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: PATRICIA SHANKLE

MS

01/05/2011

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