

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000098197

FILED
Apr 28, 2011
Secretary of State

Entity Name: CB INSURANCE GROUP, LLC

Current Principal Place of Business:

155 EAST BLUE HERON BLVD STE 407
WEST PALM BEACH, FL 33404

New Principal Place of Business:

155 EAST BLUE HERON BLVD STE 406
WEST PALM BEACH, FL 33404 US

Current Mailing Address:

155 EAST BLUE HERON BLVD STE 407
WEST PALM BEACH, FL 33404

New Mailing Address:

155 EAST BLUE HERON BLVD STE 406
WEST PALM BEACH, FL 33404 US

FEI Number: 27-2098687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOATMAN, JR., JAMES A ESQ.
1415 PANTHER LANE STE 340
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

BRIAN, JASON D
650 LAKESHORE DRIVE
RIVIERA BEACH, FL 33404 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: JASON BRIAN

04/28/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BRIAN, JASON D
Address: 650 LAKESHORE DRIVE
City-St-Zip: RIVIERA BEACH, FL 33404 US

Title: MGRM
Name: CHANDLER, IV, DONALD F
Address: 1326 PINE VALLEY DR
City-St-Zip: WELLINGTON, FL 33414 US

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: JASON BRIAN

MGR

04/28/2011

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