

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000098197

Entity Name: CB INSURANCE GROUP, LLC

FILED
Mar 26, 2012
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

155 EAST BLUE HERON BLVD
SUITE 407
RIVIERA BEACH, FL 33404 US

Current Mailing Address:

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

New Mailing Address:

155 EAST BLUE HERON BLVD
SUITE 407
RIVIERA 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:

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

Name and Address of New Registered Agent:

SHEPHERD, DANIEL J ESQUIRE
3896 BURNS ROAD
SUITE 101
PALM BEACH GARDENS, FL 33410 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: DANIEL J. SHEPHERD, ESQUIRE

03/26/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BRIAN, JASON D
Address: 155 E BLUE HERON BLVD, SUITE 407
City-St-Zip: RIVIERA BEACH, FL 33404 US

Title: MGR
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 D BRIAN

MGRM

03/26/2012

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