2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 04, 2012
Secretary of State

DOCUMENT# L10000120482

Entity Name: TREVOR HICKMAN INSURANCE LLC

Current Principal Place of Business:

383 SW BAYA DRIVE
LAKE CITY, FL 32025 US

New Principal Place of Business:

Current Mailing Address:

383 SW BAYA DRIVE
LAKE CITY, FL 32025 US

New Mailing Address:

FEI Number: 27-4003812 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HICKMAN, TREVOR E
164 SW KEVIN GLN
LAKE CITY, FL 32024 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: HICKMAN, TREVOR E
Address: 164 SW KEVIN GLN
City-St-Zip: LAKE CITY, FL 32024

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 Statues.

SIGNATURE: TREVOR E HICKMAN MGRM 01/04/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date