2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2011
Secretary of State

DOCUMENT# L10000125455

Entity Name: CONDO INSURANCE SPECIALISTS, LLC

Current Principal Place of Business:

162 UNIVERSITY CIRCLE
ORMOND BEACH, FL 32176

New Principal Place of Business:

1100 OCEAN SHORE BLVD. STE. 10
ORMOND BEACH, FL 32176

Current Mailing Address:

162 UNIVERSITY CIRCLE
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 27-4183209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WICHLEI, JAMES B
162 UNIVERSITY CIRCLE
ORMOND BEACH, FL 32176 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: MGR
Name: WICHLEI, JAMES B
Address: 162 UNIVERSITY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176

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: JAMES B WICHLEI MGR 04/25/2011

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