

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000002519

FILED
Apr 30, 2012
Secretary of State

Entity Name: DAVIS & WAGERS INSURANCE LLC

Current Principal Place of Business:

1242 HARBOUR POINT DR
PORT ORANGE, FL 32127

New Principal Place of Business:

140 ELLISON AVE
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

1242 HARBOUR POINT DR
PORT ORANGE, FL 32127

New Mailing Address:

140 ELLISON AVE
NEW SMYRNA BEACH, FL 32168

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, CHARLES W JR
1242 HARBOUR POINT DR
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

DAVIS, CHARLES W JR
140 ELLISON AVE
NEW SMYRNA BEACH, FL 32168 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: CHARLES W DAVIS JR

04/30/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DAVIS, CHARLES W JR
Address: 140 ELLISON AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168 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: CHARLES W DAVIS JR

MGRM

04/30/2012

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