

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000040894

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** BRIGHTWATER INSURANCE LLC

**Current Principal Place of Business:**

555 JOHNS PASS AVE  
MADEIRA BEACH, FL 33708

**New Principal Place of Business:**

13575 58TH ST N #102  
CLEARWATER, FL 33760

**Current Mailing Address:**

555 JOHNS PASS AVE  
MADEIRA BEACH, FL 33708

**New Mailing Address:**

P.O BOX 1005  
PINELLAS PARK, FL 33780

**FEI Number:** 45-1496677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TO, BECKI N  
555 JOHNS PASS AVE  
MADEIRA BEACH, FL 33708 US

**Name and Address of New Registered Agent:**

TO, BECKI N  
13575 58TH ST N #102  
CLEARWATER, FL 33760 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: BECKI TO

04/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TO, BECKI N  
Address: 13575 58TH ST N #102  
City-St-Zip: CLEARWATER, FL 33760

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: BECKI TO

MGRM

04/12/2012

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