## 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000086747

Entity Name: MCMINDES INSURANCE GROUP OF ORLANDO LLC

**FILED** Mar 06, 2012 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

5104 NORTH ORANGE BLOSSOM TRAIL, SUITE 125 5104 NORTH ORANGE BLOSSOM TRAIL ORLANDO, FL 32810 US

SUITE 125

ORLANDO, FL 32810 US

**Current Mailing Address: New Mailing Address:** 

5104 NORTH ORANGE BLOSSOM TRAIL, SUITE 125 5104 NORTH ORANGE BLOSSOM TRAIL ORLANDO, FL 32810

SUITE 125

ORLANDO, FL 32810 US

FEI Number: 45-2861420 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MCMINDES, DALE 612 SILVER BIRCH PLACE LONGWOOD, FL 32750

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:**

MCMINDES, DALE Name: Address: 612 SILVER BIRCH PLACE City-St-Zip: LONGWOOD, FL 32750 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 Statues.

SIGNATURE: DALE MCMINDES **MGR** 03/06/2012