

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000088017

FILED
Jan 07, 2012
Secretary of State

Entity Name: YOUR INSURANCE ADVISORS LLC

Current Principal Place of Business:

561 SPRING LAKE DR
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

561 SPRING LAKE DR
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 45-2921893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBBINS, LACEY M
561 SPRING LAKE DR
MELBOURNE, FL 32940 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: ROBBINS, LACEY M
Address: 561 SPRING LAKE DR
City-St-Zip: MELBOURNE, FL 32940

Title: MGRM
Name: ROBBINS, RONALD C
Address: 561 SPRING LAKE DR
City-St-Zip: MELBOURNE, FL 32940

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: LACEY M ROBBINS

MGRM

01/07/2012

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