

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000154

FILED
Jan 12, 2010
Secretary of State

Entity Name: CROWN INSURANCE CONSULTING, L.C.

Current Principal Place of Business:

1101 BRICKELL AVE
STE 206
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 468
NORFOLK, CT 06058

New Mailing Address:

FEI Number: 65-0739804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAUN, GUSTAV P
1110 BRICKELL AVE
STE 206
MIAMI, FL 33131 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: BRAUN, GUSTAV P
Address: 360 NORTH ST
City-St-Zip: NORFOLK, CT 06058

Title: MGR
Name: BRAUN, THERESE D
Address: 360 NORTH ST
City-St-Zip: NORFOLK, CT 06058

Title: MGR
Name: BRAUN, GERARD P
Address: 151 CRANDON BLVD, UNIT 525
City-St-Zip: KEY BISCAWAYNE, FL 33149

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: GUSTAV P BRAUN

MGRM

01/12/2010

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