

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002055

FILED  
Apr 17, 2007  
Secretary of State

**Entity Name:** PEACHTREE SPECIAL RISK BROKERS, LLC

**Current Principal Place of Business:**

250 CORPORATE CENTER COURT  
STOCKBRIDGE, GA 30281

**New Principal Place of Business:**

825 FAIRWAYS COURT, SUITE 100  
STOCKBRIDGE, GA 30281

**Current Mailing Address:**

250 CORPORATE CENTER COURT  
STOCKBRIDGE, GA 30281

**New Mailing Address:**

825 FAIRWAYS COURT, SUITE 100  
STOCKBRIDGE, GA 30281

FEI Number: 58-2518931

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRAMMIG, LAUREL L  
401 E. JACKSON STREET, SUITE 1700  
BROWN & BROWN, INC.  
TAMPA, FL 33602 US

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: JACQUELINE M. GILES

04/17/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BROWN & BROWN, INC.,  
Address: 401 E. JACKSON STREET, SUITE 1700  
City-St-Zip: TAMPA, FL 33602

Title: MGR (X) Delete  
Name: STRIANESE, ANTHONY  
Address: 250 CORPORATE CENTER COURT  
City-St-Zip: STOCKBRIDGE, GA 30281

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: STRIANESE, ANTHONY T  
Address: 825 FAIRWAYS COURT, SUITE 100  
City-St-Zip: STOCKBRIDGE, GA 30281

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: ANTHONY T. STRIANESE

MGR

04/17/2007

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