## 2006 LIMITED LIABILITY COMPANY **FILED ANNUAL REPORT** Apr 05, 2006 08:00 AM Secretary of State **DOCUMENT # M05000002948** SRG INSURANCE AGENCY LLC Principal Place of Business Mailing Address 19015 DOVE CREEK DRIVE 19015 DOVE CREEK DRIVE TAMPA, FL 33647-3065 TAMPA, FL 33647-3065 CR2E083 (11/05) 03212008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied Far 4. FEI Number 13-3937151 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent KEEVERS, TIMOTHY L DO NOT WRITE 19015 DOVE CREEK DRIVE TAMPA, FL 33647-3065 IN THIS SPACE 8. The above named entity submits this statement for the purpos filice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE. U00000493232 Filing Fee is \$50.00 Que by May 1, 2006 04/19/06-80097-009 55.00 MANAGING MEMBERS/MANAGERS 9. MGR 3131 F KEEVERS, TIMOTHY L NAME 19015 DOVE CREEK DRIVE STREET ADDRESS City-St-Zir TAMPA, FL 336473065 TITLE HAME STREET ADDRESS C27Y-51-21P NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE mil NAME STREET ADDRESS CITY-ST-77P TITLE NAME STREET ADDRESS CITY-ST-ZIP TIDE HAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this upport as equiped by Chapter 508, Florida Statutes

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