

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006253

FILED
Apr 03, 2009
Secretary of State

Entity Name: ALLIED NORTH AMERICA INSURANCE BROKERAGE OF FLORIDA, LLC

Current Principal Place of Business:

550 BILTMORE WAY
PH-2B
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

390 N BROADWAY
JERICHO, NY 11753

New Mailing Address:

FEI Number: 02-0720395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: MGR () Delete
Name: MARINO, WILLIAM A CEO
Address: 390 N. BROADWAY
City-St-Zip: JERICHO, NY 11753

Title: MGR () Delete
Name: LOMBARDI, HENRY C COO
Address: 390 N. BROADWAY
City-St-Zip: JERICHO, NY 11753

Title: MGR () Delete
Name: MCGANN, PETER M CFO
Address: 390 N BROADWAY
City-St-Zip: JERICHO, NY 11753

Title: MGR () Delete
Name: RODRIGUEZ, JOSE MGR DIR
Address: 550 BILTMORE WAY, PH-2B
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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

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

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

Title: MGR (X) Change () Addition
Name: EVANS, ALEJANDRA PRES
Address: 550 BILTMORE WAY, PH-2B
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM A. MARINO

CEO

04/03/2009

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