

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004837

FILED
Jan 05, 2010
Secretary of State

Entity Name: OAKBRIDGE INSURANCE SERVICES, LLC

Current Principal Place of Business:

850 STANTON ROAD
BURLINGAME, CA 94010

New Principal Place of Business:

Current Mailing Address:

850 STANTON ROAD
BURLINGAME, CA 94010

New Mailing Address:

FEI Number: 65-1255686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CARPENTER, KINSEY LEAS
Address: 850 STANTON ROAD
City-St-Zip: BURLINGAME, CA 94010

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: KINSEY LEAS CARPENTER

MGRM

01/05/2010

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