

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000000951

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** TEXAS WASATCH INSURANCE HOLDINGS GROUP, LLC

**Current Principal Place of Business:**

100 E. ROYAL LN., STE 320  
IRVING, TX 75039

**New Principal Place of Business:**

**Current Mailing Address:**

100 E. ROYAL LN., STE 320  
IRVING, TX 75039

**New Mailing Address:**

**FEI Number:** 74-3107164

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DRIVE STE A  
TALLAHASSEE, FL 32301 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  
**Name:** JONES, MARK E  
**Address:** 100 E. ROYAL LN., STE 320  
**City-St-Zip:** IRVING, TX 75039

**Title:** MGR  
**Name:** JONES, ROBYN  
**Address:** 100 E. ROYAL LN., STE 320  
**City-St-Zip:** IRVING, TX 75039

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:** MARK E JONES

MGR

02/16/2011

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