## 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M09000000283

Entity Name: VIST INSURANCE, LLC

FILED Jan 13, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1240 BROADCASTING ROAD WYOMISSING, PA 19610

Current Mailing Address: New Mailing Address:

460 NORRISTOWN ROAD 1767 SENTRY PARKWAY WEST SUITE 103 SUITE 210 BLUE BELL, PA 19422 BLUE BELL, PA 19422

FEI Number: 13-4212555 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HATCH, JOHN D ESQ 1267 BERKSHIRE LANE, SUITE 200 TARPON SPRINGS, FL 34688 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:

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM

Name: DAVIS, ROBERT

Address: 1240 BROADCASTING ROAD City-St-Zip: WYOMISSING, PA 19610

Title: MGRM

Name: WEBER, ALFRED

Address: 1240 BROADCASTING ROAD City-St-Zip: WYOMISSING, PA 19610

Title: MGRM

Name: BOOTHBY, RICHARD

Address: 1767 SENTRY PARKWAY WEST, SUITE 210

City-St-Zip: BLUE BELL, PA 19422

Title: MGRM

Name: HOPKINS, CHARLES
Address: 1240 BROADCASTING ROAD
City-St-Zip: WYOMISSING, PA 19610

Title: MGRM

Name: HERR, MICHAEL

Address: 1240 BROADCASTING ROAD City-St-Zip: WYOMISSING, PA 19610

Title: MGRM

Name: BURTON, JAMES

Address: 1240 BROADCASTING ROAD City-St-Zip: WYOMISSING, PA 19610

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 Statues.

SIGNATURE: SHARON L DIAB AVP 01/13/2011