2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: VIST INSURANCE, LLC

Current Principal Place of Business:

1240 BROADCASTING ROAD
WYOMISSING, PA 19610

New Principal Place of Business:

Current Mailing Address:

1767 SENTRY PARKWAY WEST
SUITE 210
BLUE BELL, PA 19422

New Mailing Address:

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

Name and Address of Current Registered Agent:

HATCH, JOHN D ESQ
1267 BERKSHIRE LANE, SUITE 200
TARPON SPRINGS, FL 34688 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: 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: MICHAEL C. HERR MGMR 01/05/2012

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