

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000002317

**FILED**  
**May 15, 2012**  
**Secretary of State**

**Entity Name:** CHAMPIONS ASSURANCE GP LLC

**Current Principal Place of Business:**

238 S FAZIO WAY  
SPRING, TX 77389

**New Principal Place of Business:**

**Current Mailing Address:**

238 S FAZIO WAY  
SPRING, TX 77389

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BOYCE, WILLIAM J  
58301 CENTRAL AVE.  
ST. PETERSBURG, FL 33710 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: MORRISSEY, CHRISTY  
Address: 238 S FAZIO WAY  
City-St-Zip: SPRING, TX 77389

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: CHRISTY MORRISSEY

PTNR

05/15/2012

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