

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000004616

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** RITTER INSURANCE MARKETING, LLC

**Current Principal Place of Business:**

4800 LINGLESTOWN RD  
STE 300  
HARRISBURG, PA 17112

**New Principal Place of Business:**

**Current Mailing Address:**

4800 LINGLESTOWN RD  
STE 300  
HARRISBURG, PA 17112

**New Mailing Address:**

**FEI Number:** 26-0000997

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR., SUITE 4  
WESTON, FL 33331 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: RITTER, CRAIG J  
Address: 4800 LINGLESTOWN RD - STE 300  
City-St-Zip: HARRISBURG, PA 17112

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: CRAIG J. RITTER

PRES

01/11/2010

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