

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000001507

FILED
Apr 26, 2011
Secretary of State

Entity Name: HAGERTY CLASSIC MARINE INSURANCE AGENCY, LLC

Current Principal Place of Business:

141 RIVERS EDGE DRIVE, SUITE 200
TRAVERSE CITY, MI 49684

New Principal Place of Business:

141 RIVERS EDGE DRIVE
200
TRAVERSE CITY, MI 49684

Current Mailing Address:

141 RIVERS EDGE DRIVE, SUITE 200
TRAVERSE CITY, MI 49684

New Mailing Address:

PO BOX 87
TRAVERSE CITY, MI 49685

FEI Number: 88-0197289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: HAGERTY, KIM
Address: 141 RIVERS EDGE DRIVE, SUITE 200
City-St-Zip: TRAVERSE CITY, MI 49684

Title: MGR
Name: HAGERTY, MCKEEL
Address: 141 RIVERS EDGE DRIVE, SUITE 200
City-St-Zip: TRAVERSE CITY, MI 49684

Title: MGR
Name: HAGERTY, TAMMY
Address: 141 RIVERS EDGE DRIVE, SUITE 200
City-St-Zip: TRAVERSE CITY, MI 49684

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: KIM HAGERTY

MGR

04/26/2011

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