

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 09, 2012
Secretary of State

Entity Name: COLLECTIBLES INSURANCE SERVICES, LLC

Current Principal Place of Business:

11350 MCCORMICK ROAD, SUITE 700
HUNT VALLEY, MD 20131

New Principal Place of Business:

Current Mailing Address:

11350 MCCORMICK ROAD, SUITE 700
HUNT VALLEY, MD 20131

New Mailing Address:

THREE BALA PLAZA EAST
SUITE 300
BALA CYNWYD, PA 19004

FEI Number: 30-0622321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: SCOTT, MATTHEW B
Address: 3 BALA PLAZA EAST, SUITE 300
City-St-Zip: BALA CYNWYD, PA 19004

Title: MGR
Name: LEBENS, JOSEPH
Address: 3 BALA PLAZA EAST, SUITE 300
City-St-Zip: BALA CYNWYD, PA 19004

Title: MGR
Name: HOHN, LINDA C
Address: 3 BALA PLAZA EAST, SUITE 300
City-St-Zip: BALA CYNWYD, PA 19004

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: LINDA C. HOHN

MGR

01/09/2012

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