2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2012
Secretary of State

DOCUMENT# M11000002422

Entity Name: PRIVATE CLIENT INSURANCE LLC

Current Principal Place of Business:

1490 HIGHWAY A1A, SUITE 302
SATELLITE BEACH, FL 32937

New Principal Place of Business:

2770 INDIAN RIVER BLVD
SUITE 306
VERO BEACH, FL 32960

Current Mailing Address:

1490 HIGHWAY A1A, SUITE 302
SATELLITE BEACH, FL 32937

New Mailing Address:

PO BOX 780
MCHENRY, MD 21541

FEI Number: 27-4476118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RADCLIFF, TRACI R
1490 HIGHWAY A1A, SUITE 302
SATELLITE BEACH, FL 32937 US

Name and Address of New Registered Agent:

RADCLIFF, TRACI R
2770 INDIAN RIVER BLVD
SUITE 306
VERO BEACH, FL 32960 US

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: 03/20/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RADCLIFF, TRACI R
Address: 2770 INDIAN RIVER BLVD SUITE 306
City-St-Zip: VERO BEACH, FL 32960

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: TRACI R RADCLIFF MGRM 03/20/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date