

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000215

FILED
Jul 29, 2004
Secretary of State

Entity Name: ASSETAMERICA INSURANCE AGENCIES, LLC

Current Principal Place of Business:

5540 PARK BLVD. UNIT 1 A
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

5540 PARK BLVD. UNIT 1 A
PINELLAS PARK, FL 33781

New Mailing Address:

RIVER EDGE ONE, 550 INTERSTATE NORTH PKWY
SUITE 600
ATLANTA, GA 30328 US

FEI Number: 58-2368235

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/MEMBERS:

Title: MGRM () Delete
Name: STUMBAUGH, LAWRENCE
Address: 5500 INTERSTATE PKWY NO STE. 600
City-St-Zip: ATLANTA, GA 30328

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ASSURANCEAMERICA COR, PORATION
Address: RIVER EDGE ONE, 550 INTERSTATE N. PKWY
City-St-Zip: ATLANTA, GA 30328 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: LAWRENCE STUMBAUGH

CEO

07/29/2004

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