

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000015877

**Entity Name:** HERNDON & ASSOCIATES INSURANCE, LLC

**Current Principal Place of Business:**

91 LAKE MORTON DRIVE  
LAKELAND, FL 33801

**Current Mailing Address:**

BOX 3608  
LAKELAND, FL 33802 US

**FEI Number:** 59-1994337

**Certificate of Status Desired:** No

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

PUGH, DUANE FMGRM  
91 LAKE MORTON DR  
LAKELAND, FL 33801 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WILDER, MARC HMEMBER  
Address 91 LAKE MORTON DR  
City-State-Zip: LAKELAND FL 33801

Title MGR  
Name BODOLAY, ROBERT JMEMBER  
Address 91 LAKE MORTON DR  
City-State-Zip: LAKELAND FL 33801

Title MGR  
Name BUSH, JOHN RMEMBER  
Address 91 LAKE MORTON DR  
City-State-Zip: LAKELAND FL 33801

Title MGRM  
Name PUGH, DUANE FMEMBER  
Address 91 LAKE MORTON DR  
City-State-Zip: LAKELAND FL 33801

Title MGR  
Name BUSH, CATHERINE EMEMBER  
Address 91 LAKE MORTON DR  
City-State-Zip: LAKELAND FL 33801

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARC H WILDER

MGR

04/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date