

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063736

Entity Name: INSURANCE MEDIA SERVICES, LLC

Current Principal Place of Business:

501 ISLAND WAY
CLEARWATER, FL 33767

Current Mailing Address:

PO BOX 1400
CLEARWATER, FL 33757 US

FEI Number: 20-1553295

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WARD, R. CARLTON
1253 PARK STREET
CLEARWATER, FL 33756 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 MGRM
Name SLAUGHTER, DAVID B
Address 501 ISLAND WAY
City-State-Zip: CLEARWATER FL 33767

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID B SLAUGHTER

MANAGING MEMBER

04/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date