

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000044287

Entity Name: JOMAR & ASSOCIATES INSURANCE AGENCY LLC

Current Principal Place of Business:

28870 U.S. HIGHWAY 19 N
313
CLEARWATER, FL 33761

Current Mailing Address:

P.O. BOX 2407
OLDSMAR, FL 34677

FEI Number: 26-0321626

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARCIANO, STEVEN
28870 U.S. HIGHWAY 19 N
SUITE 313
CLEARWATER, FL 33761 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 MARCIANO, STEVEN
Address 28870 U.S. HIGHWAY 19 N, SUITE 313

City-State-Zip: CLEARWATER FL 33761

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: STEVEN MARCIANO

MGRM

04/18/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date