

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000063218

Entity Name: AFFORDABLE INSURANCE SERVICES OF CENTRAL FLORIDA
LLC

FILED
Feb 22, 2013
Secretary of State
CC1982088280

Current Principal Place of Business:

643 W NEW YORK AVE
DELAND, FL 32720

Current Mailing Address:

643 W NEW YORK AVE
DELAND, FL 32720

FEI Number: 94-3485222

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LONGFELLOW, SUE A
643 W NEW YORK AVE
DELAND, FL 32720 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: SUE A LONGFELLOW

02/22/2013

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGRM
Name	LONGFELLOW, SUE A	Name	CLOPEIN, JEAN C
Address	643 W NEW YORK AVE	Address	634 MOUNTCLAIR AVE
City-State-Zip:	DELAND FL 32720	City-State-Zip:	ORANGE CITY FL 32763

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: SUE A LONGFELLOW

MANAGER

02/22/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date