

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000001640

Entity Name: THE WRIGHT INSURANCE GROUP, LLC

Current Principal Place of Business:

3491 SOUTHWIND DR
GULF BREEZE, FL 32563

Current Mailing Address:

444 N. MICHIGAN AVE., SUITE 1200
CHICAGO, IL 60611 US

FEI Number: 80-1511427

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, FRANK JIII
3491 SOUTHWIND DR
GULF BREEZE, FL 32563 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 WRIGHT, FRANK JIII
Address 3491 SOUTHWIND DR
City-State-Zip: GULF BREEZE FL 32563

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: FRANK J. WRIGHT III

PRESIDENT

04/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date