

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000074927

Entity Name: JAMES DESANTIS INSURANCE, LLC

Current Principal Place of Business:

11924 WEST FOREST HILL BLVD
SUITE 1
WELLINGTON, FL 33414

Current Mailing Address:

4052 N SAN ANDROS
WEST PALM BEACH, FL 33411

FEI Number: 45-5424260

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DESANTIS, JAMES
4052 N SAN ANDROS
WEST PALM BEACH, FL 33411 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 DESANTIS, JAMES J
Address 4052 N SAN ANDROS
City-State-Zip: WEST PALM BEACH FL 33411

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: JAMES DESANTIS

MGMR

04/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date