

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000173839

Entity Name: BRUER INSURANCE COMPANY LLC

Current Principal Place of Business:

5854 ATLANTIC BLVD
JACKSONVILLE, FL 32207

Current Mailing Address:

122 CRANES LAKE DRIVE
PONTE VEDRA BEACH, FL 32082

FEI Number: 47-2288686

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUER, WARREN C
122 CRANES LAKE DRIVE
PONTE VEDRA BEACH, FL 32082 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 BRUER, WARREN C
Address 122 CRANES LAKE DRIVE
City-State-Zip: PONTE VEDRA BEACH FL 32082

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: WARREN BRUER

MANAGER

04/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date