2015 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: Yes

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

FILED Apr 23, 2015

Secretary of State

CC4608373223

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: WARREN BRUER

MANAGER

04/23/2015

Date