## **2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000003612

Entity Name: PEARL INSURANCE GROUP, LLC

**Current Principal Place of Business:** 

1200 E GLEN AVE

PEORIA HEIGHTS, IL 61616-5348

**Current Mailing Address:** 

1200 E GLEN AVE

PEORIA HEIGHTS. IL 61616-5348 US

FEI Number: 37-0817309 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 19, 2013

**Secretary of State** 

CC7378389142

## Authorized Person(s) Detail:

Title MGR

Name PEARL, GARY P Address 1220 E GLEN AVE.

City-State-Zip: PEORIA HEIGHTS IL 61616

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.