2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Mar 08, 2007 08:00 AM **DOCUMENT # 206171** Secretary of State CHASE INSURANCE AGENCY, INC. Principal Placo of Business Mailing Address 333 N.W. 70TH AVENUE, #108 PLANTATION FL 33317-2358 333 N.W. 70TH AVENUE, #108 PLANTATION FL 33317-2358 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-0821658 Not Applicable Zιο Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo CHASE, RICHARD Street Address (P.O. Box Number is Not Acceptable) 333 N.W. 70TH AVENUE PLANTATION FL 33317 City Zip Code 8. The above named onlity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title r applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete Change Addition HHT 11111 CHASE, RICHARD U00000659538 03/16/07-80034-022 150.00 NAME NAME 333 N.W. 70TH AVE. #108 STREET ADDRESS STREET ADDRESS PLANTATION FL CIFY-ST-7IP CHY-SI-ZIP Delete 100 ☐ Change Addition STREET ADORESS STREET ADORESS CITY-ST-7IP CHY-SI-7(P Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - ST - ZIP ☐ Delete Change Addition NAME STREET ADDRESS STRUET ADDRESS CHY-SI-7P City-SI-7IP Delete Addition mu: mu: ☐ Change NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP CITY-SI-ZIP ☐ Change ■ AddItion DILE Delete 11711 NAMI NAMI STREET ADORESS STREET ADDRESS CilY-S1-7IP CITY-ST-ZIP

I horeby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath: that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment withyan address, with all other like empowered.

SIGNATURE: