

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F85922

FILED
Jan 17, 2009
Secretary of State

Entity Name: MIKE ELLIOTT INSURANCE AGENCY, INC.

Current Principal Place of Business:

401 LAKE HOWELL ROAD
MAITLAND, FL 327515906

New Principal Place of Business:

401 LAKE HOWELL ROAD
MAITLAND, FL 327515906 US

Current Mailing Address:

401 LAKE HOWELL ROAD
MAITLAND, FL 327515906

New Mailing Address:

401 LAKE HOWELL ROAD
MAITLAND, FL 327515906 US

FEI Number: 59-2192004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ELLIOTT, MICHAEL L
401 LAKE HOWELL ROAD
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

ELLIOTT, MICHAEL L
401 LAKE HOWELL ROAD
MAITLAND, FL 327515906 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:

01/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ELLIOTT, MICHAEL L,
Address: 401 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL

Title: TS () Delete
Name: ELLIOTT, JOAN K.,
Address: 401 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL

Title: VP () Delete
Name: ELLIOTT, TODD L.
Address: 401 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL

Title: VP () Delete
Name: ELLIOTT, MICHELLE L
Address: 401 LAKE HOWELL RD
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ELLIOTT, MICHAEL L,
Address: 401 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL 327515906 US

Title: TS (X) Change () Addition
Name: ELLIOTT, JOAN K.,
Address: 401 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL 327515906 US

Title: VP (X) Change () Addition
Name: ELLIOTT, TODD L.
Address: 401 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL 327515906 US

Title: VP (X) Change () Addition
Name: FORRESTAL, MICHELLE E
Address: 401 LAKE HOWELL RD
City-St-Zip: MAITLAND, FL 327515906 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL L ELLIOTT

DP

01/17/2009

Electronic Signature of Signing Officer or Director

Date