2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2007
Secretary of State

DOCUMENT# G10006

Entity Name: UNIVERSAL INSURANCE AGENCY, INC.

Current Principal Place of Business:

3115 SPRING GLEN RD STE 507
JACKSONVILLE, FL 32207

New Principal Place of Business:

3115 SPRING GLEN RD
SUITE 507
JACKSONVILLE, FL 32207

Current Mailing Address:

3115 SPRING GLEN RD STE 507
JACKSONVILLE, FL 32207

New Mailing Address:

3115 SPRING GLEN RD
SUITE 507
JACKSONVILLE, FL 32207

FEI Number: 59-2251989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, JAMES
217 PONTE VEDRA PARK DRIVE
BUILDING 100 SUITE 200
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

WALKER, JAMES
228 PONTE VEDRA PARK DRIVE
BUILDING 100 SUITE 200
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: JAMES V. WALKER 02/14/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ROMITA, JOAN,
Address: 2207 SEGOVIA AVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP (X) Delete
Name: SMALL, ROBERT,
Address: 3801 CROWN POINT #2114
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOAN ROMITA PD 02/14/2007
Electronic Signature of Signing Officer or Director Date