

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G10006

FILED
Feb 12, 2008
Secretary of State

Entity Name: UNIVERSAL INSURANCE AGENCY, INC.

Current Principal Place of Business:

3115 SPRING GLEN RD
SUITE 507
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

3115 SPRING GLEN RD
SUITE 507
JACKSONVILLE, FL 32207

New Mailing Address:

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
228 PONTE VEDRA PARK DRIVE
BUILDING 100 SUITE 200
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROMITA, JOAN,
Address: 2937 CHRISTOPHER CREEK RD N
City-St-Zip: JACKSONVILLE, FL 32217

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: JOAN ROMITA

PRES

02/12/2008

Electronic Signature of Signing Officer or Director

Date