2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# P00000038986

Entity Name: AGGRESSIVE INSURANCE INC.

Current Principal Place of Business:

9318 E. COLONIAL DR.
A-16
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

9318 E. COLONIAL DR., #A-16
ORLANDO, FL 32817

New Mailing Address:

9318 E. COLONIAL DR.
A-16
ORLANDO, FL 32817

FEI Number: 59-3639285 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PACHECO, SARA
9318 E. COLONIAL DR., #A-16
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

PACHECO, SARA
9318 E. COLONIAL DR.
A-16
ORLANDO, FL 32817 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: SARA PACHECO 03/31/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PACHECO, SARA
Address: 9318 E. COLONIAL DR., #A-16
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SARA PACHECO P 03/31/2009
Electronic Signature of Signing Officer or Director Date