

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051727

FILED
Feb 01, 2012
Secretary of State

Entity Name: GEHRING INSURANCE, INC.

Current Principal Place of Business:

4362 NORTHLAKE BLVD.
SUITE 208
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

4440 PGA BOULEVARD
SUITE 408
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4362 NORTHLAKE BLVD.
SUITE 208
PALM BEACH GARDENS, FL 33410

New Mailing Address:

4440 PGA BOULEVARD
SUITE 408
PALM BEACH GARDENS, FL 33410

FEI Number: 65-1113015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEHRING, KLIF
334 JACARANDA DRIVE
JUPITER, FL 33458 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

OFFICERS AND DIRECTORS:

Title: P
Name: GEHRING, KLIF
Address: 334 JACARANDA DRIVE
City-St-Zip: JUPITER, FL 33458

Title: VP
Name: GEHRING, MARILYN
Address: 411 WOOWIEW CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby 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 all other like empowered.

SIGNATURE: KLIF GEHRING

P

02/01/2012

Electronic Signature of Signing Officer or Director

Date