2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110419

Apr 28, 2011 Secretary of State

Entity Name: SCOTT CAMERON INSURANCE AGENCY, INC.

Current Principal Place of Business: New Principal Place of Business:

5355 SW COLLEGE ROAD OCALA, FL 34474

Current Mailing Address: New Mailing Address:

5355 SW COLLEGE ROAD OCALA, FL 34474

FEI Number: 56-2307033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAMERON, SCOTT 5355 SW COLLEGE ROAD OCALA, FL 34474 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: CAMERON, SCOTT J
Address: 5355 SW COLLEGE ROAD
City-St-Zip: OCALA, FL 34474

Title:

 Name:
 CONSTANCE, CAMERON

 Address:
 5010 SW 2ND AVE

 City-St-Zip:
 OCALA, FL 34474

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: SCOTT J CAMERON PRES 04/28/2011