

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000105233

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** TAMI KAROL INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

2440 SE FEDERAL HWY  
SUITE W  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

2440 SE FEDERAL HWY  
SUITE W  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 26-1193953      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GUEST, JAMES M  
JAMES M. GUEST, COA, P.A.  
50 KINDRED STREET, SUITE 303  
STUART, FL 34994 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: D  
Name: KAROL, TAMI  
Address: 2440 SE FEDERAL HWY STE W  
City-St-Zip: STUART, FL 34994

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: TAMI KAROL

D

04/27/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date