

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 480222

**Entity Name:** CALKINS-KRAMER INSURANCE INC.

**Current Principal Place of Business:**

10261 FOURTH ST., N.  
ST. PETERSBURG, FL 33716-3809

**Current Mailing Address:**

10261 FOURTH ST., N.  
ST. PETERSBURG, FL 33716-3809 US

**FEI Number:** 59-1607068

**Certificate of Status Desired:** No

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

CALKINS, KEIFER  
10261 FOURTH ST., N.  
ST. PETERSBURG, FL 33716-3809 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

**Officer/Director Detail :**

Title PSTD  
Name CALKINS, KEIFER .  
Address 10261 4TH STREET NORTH  
City-State-Zip: ST. PETERSBURG FL 33716

Title V  
Name CALKINS, KYLE  
Address 10261 4TH STREET N.  
City-State-Zip: ST. PETERSBURG FL 33716

Title V  
Name DIOTTE, JOANNE  
Address 10261 4TH STREET N  
City-State-Zip: ST. PETERSBURG FL 33716

*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:** KEIFER CALKINS

**PRESIDENT**

**03/26/2013**

Electronic Signature of Signing Officer/Director Detail

Date