

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000032267

**Entity Name:** SHARON BRIMMER AGENCY, INC.

**Current Principal Place of Business:**

1575 PINE RIDGE RD, UNIT 8  
NAPLES, FL 34109

**Current Mailing Address:**

1575 PINE RIDGE RD, UNIT 8  
NAPLES, FL 34109

**FEI Number:** 65-1194049

**Certificate of Status Desired:** No

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

BRIMMER, SHARON  
1575 PINE RIDGE RD  
NAPLES, FL 34109 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            PRES  
Name            BRIMMER, SHARON E  
Address        480 23RD ST SW  
City-State-Zip: NAPLES FL 34117

Title            VP  
Name            BRIMMER, KURT A  
Address        480 23RD ST SW  
City-State-Zip: NAPLES FL 34117

*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:** SHARON BRIMMER

**PRESIDENT**

**04/15/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date