

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001411

Entity Name: ANALYZE,INFORM AND MARKET INSURANCE, INC.

Current Principal Place of Business:

11675 RAINWATER DRIVE STE 200
ALPHARETTA, GA 30009

Current Mailing Address:

11675 RAINWATER DRIVE STE 200
ALPHARETTA, GA 30009

FEI Number: 58-1970461

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DCT
Name ANTONELLI, MICHAEL F
Address 3020 LANCASTER SQUARE
City-State-Zip: ROSWELL GA 30076

Title DVPS
Name ANTONELLI, NOREEN A
Address 3020 LANCASTER SQUARE
City-State-Zip: ROSWELL GA 30076

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: NOREEN A. ANTONELLI

EVP, SECY

05/01/2014

Electronic Signature of Signing Officer/Director Detail

Date