2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 250064

Entity Name: MCCLAIN INSURANCE AGENCY, INC.

FILED Oct 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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1242 OCEAN SHORE BLVD NO 1242 OCEAN SHORE BLVD ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32176

Current Mailing Address: New Mailing Address:

1242 OCEAN SHORE BLVD NO 1242 OCEAN SHORE BLVD ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32176

FEI Number: 59-0940169 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BROWN, GEORGE T 60 BRAMBLEWOOD LANE ORMOND BEACH, FL 32174 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: GEORGE T BROWN

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BROWN, VERONICA B BROWN, VERONICA B Name: Name: 60 BRAMBLEWOOD LANE 60 BRAMBLEWOOD LANE Address: Address: City-St-Zip: ORMAOND BEACH, FL City-St-Zip: ORMAOND BEACH, FL 32174

Title: PTS () Delete Title: PTS (X) Change () Addition

 Name:
 BROWN, GEORGE T
 Name:
 BROWN, GEORGE T

 Address:
 60 BRAMBLEWOOD LANE
 Address:
 60 BRAMBLEWOOD LANE

 City-St-Zip:
 ORMOND BCH, FL
 City-St-Zip:
 ORMOND BCH, FL
 32174

Title: VP () Delete Title: () Change () Addition

 Name:
 BROWN, CRAIG T
 Name:

 Address:
 1224 OAKWOOD AVE
 Address:

 City-St-Zip:
 DAYTONA BEACH, FL 32114
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEORGE T BROWN PRES 10/04/2007