

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 278959

FILED
Mar 29, 2007
Secretary of State

Entity Name: BEST INSURANCE AGENCY OF BROWARD INC

Current Principal Place of Business:

7901 SW 6 CT.
430
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

7901 SW 6 CT.
430
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 59-1039398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

J. KEITH BOWMAN, JR.
7901 SW 6 CT.
430
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: J. KEITH BOWMAN, JR.,
Address: 3100 NE 48 CT #212
City-St-Zip: LIGHTHOUSE POINT, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: J. KEITH BOWMAN, JR.,
Address: 241 SE 8TH AVE
City-St-Zip: DEERFIELD BEACH, FL 33441

I hereby certify that the information supplied with this filing does not qualify for the 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: J. KEITH BOWMAN JR.

PRES

03/29/2007

Electronic Signature of Signing Officer or Director

Date