

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 286493

FILED
Jan 04, 2012
Secretary of State

Entity Name: BELTON INSURANCE AGENCY, INC.

Current Principal Place of Business:

525 W. MAIN ST.
TAVARES, FL 32778 US

New Principal Place of Business:

Current Mailing Address:

525 W. MAIN STREET
TAVARES, FL 32778 US

New Mailing Address:

FEI Number: 59-1085703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELTON, THERESA A
525 W. MAIN STREET
TAVARES, FL 32778 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

OFFICERS AND DIRECTORS:

Title: PD
Name: BELTON, THERESA A
Address: 1101 MORNINGSIDE DR.
City-St-Zip: EUSTIS, FL 32726

Title: TD
Name: BELTON, FREDERICK C
Address: 1745 HEIM RD.
City-St-Zip: MT. DORA, FL 32757

Title: S
Name: WEIS, DOROTHY
Address: 1130 BELMONT CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: D
Name: BELTON, FREDERICK L
Address: 701 FAHNSTOCK
City-St-Zip: EUSTIS, FL 32726

Title: VP
Name: BELTON, F. CHRISTOPHER
Address: 811 RUGBY ST.
City-St-Zip: ORLANDO, FL 32804

Title: D
Name: BELTON, TRACY M
Address: 1745 HEIM RD.
City-St-Zip: MT. DORA, FL 32757

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: FREDERICK C. BELTON

TD

01/04/2012

Electronic Signature of Signing Officer or Director

Date