

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 299724

FILED
Jan 09, 2012
Secretary of State

Entity Name: CARROLL-MARSHALL-INSURANCE, INC

Current Principal Place of Business:

205 AVE. G S.W.
P.O. DRAWER 1460
WINTER HAVEN, FL 338821460 US

New Principal Place of Business:

205 AVE. G S.W.
WINTER HAVEN, FL 33880 US

Current Mailing Address:

205 AVE. G S.W.
P.O. DRAWER 1460
WINTER HAVEN, FL 338821460 US

New Mailing Address:

P O BOX 1460
WINTER HAVEN, FL 338821460 US

FEI Number: 59-1110943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSHALL, LARRY G.
205 AVE. G. S.W.
WINTER HAVEN, FL 33880 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: MARSHALL, LARRY G.
Address: 205 AVE. G. S.W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: STD
Name: MARSHALL, CANDACE C.
Address: 205 AVENUE G SW
City-St-Zip: WINTER HAVEN, FL 33880

Title: VPD
Name: MARSHALL, DUSTIN K.
Address: 205 AVE. G. S.W.
City-St-Zip: WINTER HAVEN, FL 33880

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: LARRY G MARSHALL

PD

01/09/2012

Electronic Signature of Signing Officer or Director

Date