

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 304036

FILED
Apr 25, 2007
Secretary of State

Entity Name: ROGER BOUCHARD INSURANCE, INC.

Current Principal Place of Business:

101 STARCREST DRIVE
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 6090
CLEARWATER, FL 33758 US

New Mailing Address:

FEI Number: 59-1117778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUCHARD, RICHARD E
101 STARCREST DRIVE
CLEARWATER, FL 33765 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: EVP () Delete
Name: CARUOLO, GARY S
Address: 1026 IDLEWILD DR N
City-St-Zip: DUNEDIN, FL 34698

Title: EVP () Delete
Name: LUPFER, SAM
Address: 101 STARCREST DRIVE
City-St-Zip: CLEARWATER, FL 33765

Title: COO () Delete
Name: BOUCHARD, TIM A
Address: 101 STARCREST DRIVE
City-St-Zip: CLEARWATER, FL 33765

Title: EVP () Delete
Name: BOUCHARD, JOHN R
Address: 101 STARCREST DRIVE
City-St-Zip: CLEARWATER, FL 33765

Title: CFO () Delete
Name: ELSEY, MATTHEW L
Address: 101 STARCREST DRIVE
City-St-Zip: CLEARWATER, FL 33765

Title: EVP () Delete
Name: HORTON, EARL
Address: 101 STARCREST DRIVE
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RICHARD E. BOUCHARD

CEO

04/25/2007

Electronic Signature of Signing Officer or Director

Date