

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 314920

FILED
Apr 25, 2012
Secretary of State

Entity Name: BROWN & BROWN OF GARDEN CITY, INC.

Current Principal Place of Business:

595 STEWART AVENUE
GARDEN CITY, NY 11530 US

New Principal Place of Business:

595 STEWART AVENUE, STE 600
GARDEN CITY, NY 11530 US

Current Mailing Address:

595 STEWART AVENUE
GARDEN CITY, NY 11530 US

New Mailing Address:

595 STEWART AVENUE, STE 600
GARDEN CITY, NY 11530 US

FEI Number: 59-1151281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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

OFFICERS AND DIRECTORS:

Title: VS
Name: GRAMMIG, LAUREL L
Address: 3101 W DR MARTIN LUTHER KING, SUITE 400
City-St-Zip: TAMPA, FL 33607

Title: DP
Name: LYDECKER, CHARLES H
Address: 220 S RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V
Name: WALKER, CORY T
Address: 220 S RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T
Name: TINSLEY, THOMAS G
Address: 220 S RIDGEWOOD AVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: EVP
Name: LABADORF, MICHAEL A
Address: 595 STEWART AVENUE
City-St-Zip: GARDEN CITY, NY 11530

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: LAUREL L GRAMMIG

VS

04/25/2012

Electronic Signature of Signing Officer or Director

_____ Date