

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 461112

FILED
Jan 03, 2011
Secretary of State

Entity Name: GEORGE H. ODIORNE INSURANCE AGENCY, INC.

Current Principal Place of Business:

1206 N. PARSONS AVE.
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 830
BRANDON, FL 33509

New Mailing Address:

FEI Number: 59-1558491 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ODIORNE, GEORGE H.
1206 N. PARSONS AVE.
BRANDON, FL 33510 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: ODIORNE, GEORGE H.
Address: 1206 N. PARSONS AVE.
City-St-Zip: BRANDON, FL 33510 US

Title: VPST
Name: ODIORNE, THOMAS W
Address: 1206 N. PARSONS AVE
City-St-Zip: BRANDON, FL 33510 US

Title: VP
Name: ODIORNE, STEVEN F
Address: 1206 N. PARSON AVE
City-St-Zip: BRANDON, FL 33510 US

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: GEORGE H. ODIORNE

PRES

01/03/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date