

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 468857

FILED
Jan 04, 2010
Secretary of State

Entity Name: DEAKINS-CARROLL INSURANCE AGENCY, INC.

Current Principal Place of Business:

5600 S. FED. HWY
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1597
PORT SALERNO, FL 34992 US

New Mailing Address:

FEI Number: 59-1579049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAKINS, DAVID
5600 S. FEDERAL HIGHWAY
STUART, FL 33497 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: PD
Name: DEAKINS, DAVID
Address: 4520 SE BAYSHORE TERR
City-St-Zip: STUART, FL 34997

Title: ST
Name: DEAKINS, MELBA C
Address: 4520 SE BAYSHORE TERR
City-St-Zip: STUART, FL 34997

Title: VP
Name: DEAKINS, DONNA
Address: 4520 SE BAYSHORE TERR
City-St-Zip: STUART, FL 34997

Title: VP
Name: CARROLL, DELOS LEE
Address: 1050 NE TOWN TERRACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: VP
Name: BRODERICK, MISTY
Address: 2290 SW GOLDEN BEAR WAY
City-St-Zip: PALM CITY, FL 34990

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: MELBA C. DEAKINS

ST

01/04/2010

Electronic Signature of Signing Officer or Director

Date