

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760285

FILED
Mar 03, 2009
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF INSURANCE AGENTS, INC.

Current Principal Place of Business:

3159 SHAMROCK DR., S.
TALLAHASSEE, FL 32308

New Principal Place of Business:

3159 SHAMROCK DR., S.
TALLAHASSEE, FL 32309

Current Mailing Address:

3159 SHAMROCK DR., S.
TALLAHASSEE, FL 32308

New Mailing Address:

PO BOX 12129
TALLAHASSEE, FL 323172129 US

FEI Number: 59-0247064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRADY, JEFFREY W
3159 SHAMROCK DRIVE SOUTH
TALLAHASSEE, FL 32308 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: D () Delete
Name: FRANKLIN, SCOTT
Address: PO BOX 486
City-St-Zip: LAKE LAND, FL 33802 US

Title: D () Delete
Name: COSGROVE, LAURA
Address: 2807 EDGEWATER DR
City-St-Zip: ORLANDO, FL 32804 US

Title: D () Delete
Name: GIBSON, ROGER
Address: 751 OAK ST, STE 100
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: P () Delete
Name: GRADY, JEFFREY W
Address: 3159 SHAMROCK S
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: HARVEY, LARRY
Address: 105 C.R. 315 SOUTH
City-St-Zip: INTERLACHEN, FL 32148 US

Title: C () Delete
Name: SIMMS, STEVE
Address: 271 W CANTON AVE
City-St-Zip: WINTER PARK, FL 32789 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LUDWIG, ROBERT AIC
Address: 300 S ORANGE AVE
City-St-Zip: SARASOTA, FL 34236 US

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
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: BALL, KIRK
Address: 1701 W GARDEN ST
City-St-Zip: PENSACOLA, FL 32501 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY W GRADY

P

03/03/2009

Electronic Signature of Signing Officer or Director

Date