

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 768830

FILED
Oct 30, 2008
Secretary of State

Entity Name: INDEPENDENT INSURANCE AGENTS OF TALLAHASSEE, INC.

Current Principal Place of Business:

2810 INDUSTRIAL PLAZA DRIVE
SUITE C
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

267 JOHN KNOX ROAD
SUITE 114
TALLAHASSEE, FL 32303 US

Current Mailing Address:

PO BOX 13978
TALLAHASSEE, FL 32317 US

New Mailing Address:

267 JOHN KNOX ROAD, SUITE 114
TALLAHASSEE, FL 32303 US

FEI Number: 59-2357439 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CABRERA, SUSAN
2810 INDUSTRIAL PLAZA DRIVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

SCARRY, DENNIS
267 JOHN KNOX ROAD, SUITE 114
TALLAHASSEE, FL 32303 US

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: DENNIS SCARRY

10/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ED () Delete
Name: CABRERA, SUSAN
Address: 2810C INDUSTRIAL PLAZA DRIEV
City-St-Zip: TALLAHASSEE, FL 32301

Title: P () Delete
Name: BROWN, BILL
Address: 3606 MACLAY BLVD SOUTH
City-St-Zip: TALLAHASSEE, FL 32312

Title: T () Delete
Name: WILKERSON, KIM
Address: 7 HICKORY AVENUE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: PP () Delete
Name: MOTT, JEFF
Address: 240 N MAGNOLIA DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: V (X) Delete
Name: MCCLELLAND, STEVE
Address: 108 E WASHINGTON STREET
City-St-Zip: MONTICELLO, FL 32344

Title: P (X) Delete
Name: MADSEN, VAN
Address: 1602 WEST PLAZA DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, KEITH
Address: 3131 LONNBLADH RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP (X) Change () Addition
Name: VAUGHN, KEVIN
Address: 1117 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Change () Addition
Name: COOKSEY, KEN
Address: 209 PINEWOOD DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: S/T (X) Change () Addition
Name: BANNING, JEREMY
Address: 2505 MAHAN DR
City-St-Zip: TALLAHASSEE, FL 32308

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

SIGNATURE: KEITH JONES

P

10/30/2008

Electronic Signature of Signing Officer or Director

Date