

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001111

FILED
Apr 28, 2011
Secretary of State

Entity Name: AMERICAN INSURANCE OHIO AGENCY INC.

Current Principal Place of Business:

3070 RIVERSIDE DRIVE
COLUMBUS, OH 43221

New Principal Place of Business:

Current Mailing Address:

555 PLEASANTVILLE RD
SUITE 160 SOUTH
BRIARCLIFF MANOR, NY 10510

New Mailing Address:

FEI Number: 31-1258935

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: CEO
Name: KREITZBERG, DOUGLAS W
Address: 1 INTERNATIONAL PLAZA, STE. 400
City-St-Zip: PHILADELPHIA, PA 19013 US

Title: PRES
Name: SUPER, PHIL
Address: 1328 DUBLIN ROAD
City-St-Zip: COLUMBUS, OH 43215 US

Title: SECR
Name: SORRENTINO, JOHN
Address: 555 PLEASANTVILLE RD. STE. 1605
City-St-Zip: BRIARCLIFF MANOR, NY 10510 US

Title: TREA
Name: SUPER, PHIL
Address: 1328 DUBLIN ROAD
City-St-Zip: COLUMBUS, OH 43215 US

Title: DIR
Name: SORRENTINO, JOHN
Address: 555 PLEASANTVILLE RD
City-St-Zip: BRIARCLIFF MANOR, NY 10510 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: JOHN SORRENTINO

D

04/28/2011

Electronic Signature of Signing Officer or Director

Date