2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# F01000003224

Entity Name: PETER C. FOY & ASSOCIATES INSURANCE SERVICES, INC.

Current Principal Place of Business:

21650 OXNARD STREET
SUITE 1900
WOODLAND HILLS, CA 91367

New Principal Place of Business:

Current Mailing Address:

21650 OXNARD STREET SUITE 1900
WOODLAND HILLS, CA 91367

New Mailing Address:

21650 OXNARD STREET
SUITE 1900
WOODLAND HILLS, CA 91367

FEI Number: 95-4281021 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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: CPST ( ) Delete
Name: FOY, PETER C
Address: 21650 OXNARD ST SUITE 1900
City-St-Zip: WOODLAND HILLS, CA 91367

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: PETER FOY CEO 01/09/2009

Electronic Signature of Signing Officer or Director — Date