2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2012
Secretary of State

DOCUMENT# F04000006071

Entity Name: WELLINGTON F. ROEMER INSURANCE, INC.

Current Principal Place of Business:

3912 SUNFOREST COURT
TOLEDO, OH 43623

New Principal Place of Business:

Current Mailing Address:

3912 SUNFOREST COURT
TOLEDO, OH 43623

New Mailing Address:

FEI Number: 34-4413018 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: COBV
Name: ROEMER, WILLIAM T
Address: 3912 SUNFOREST COURT
City-St-Zip: TOLEDO, OH 43623

Title: CEOP
Name: ROEMER, WELLINGTON F III
Address: 3912 SUNFOREST COURT
City-St-Zip: TOLEDO, OH 43623

Title: DV
Name: DUE, ALEXANDER H
Address: 3912 SUNFOREST COURT
City-St-Zip: TOLEDO, OH 43623

Title: TCFO
Name: VOLLMAR, DANE
Address: 3912 SUNFOREST COURT
City-St-Zip: TOLEDO, OH 43623

Title: DV
Name: SCHWARTZ, ROBERT D
Address: 3912 SUNFOREST COURT
City-St-Zip: TOLEDO, OH 43623

Title: DV
Name: LAWRENCE, MICHAEL J
Address: 3912 SUNFOREST COURT
City-St-Zip: TOLEDO, OH 43623

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: DANE VOLLMAR TCFO 02/21/2012

Electronic Signature of Signing Officer or Director Date