

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004212

FILED
Apr 09, 2012
Secretary of State

Entity Name: GEVITY INSURANCE AGENCY, INC.

Current Principal Place of Business:

1100 SAN LEANDRO BLVD
#400
SAN LEANDRO, CA 94577

New Principal Place of Business:

1100 SAN LEANDRO BLVD.
SUITE 400
SAN LEANDRO, CA 94577

Current Mailing Address:

1100 SAN LEANDRO BLVD
#400
SAN LEANDRO, CA 94577

New Mailing Address:

1100 SAN LEANDRO BLVD.
SUITE 400
SAN LEANDRO, CA 94577

FEI Number: 20-3209497

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: PCD
Name: GOLDFIELD, BURTON M
Address: 1100 SAN LEANDRO BLVD., SUITE 400
City-St-Zip: SAN LEANDRO, CA 94577

Title: VPSD
Name: HAMMOND, GREGORY L
Address: 1100 SAN LEANDRO BLVD., SUITE 400
City-St-Zip: SAN LEANDRO, CA 94577

Title: VPTD
Name: PORTER, WILLIAM
Address: 1100 SAN LEANDRO BLVD., SUITE 400
City-St-Zip: SAN LEANDRO, CA 94577

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: GREGORY L. HAMMOND

VPSD

04/09/2012

Electronic Signature of Signing Officer or Director

Date