2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2010
Secretary of State

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Entity Name: EDGEWOOD PARTNERS INSURANCE CENTER, INC.

Current Principal Place of Business:

2000 ALAMEDA DE LAS PULGAS
SAN MATEO, CA 94403

New Principal Place of Business:

Current Mailing Address:

2000 ALAMEDA DE LAS PULGAS
SAN MATEO, CA 94403

New Mailing Address:

FEI Number: 94-3195221 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES INC
2731 EXECUTIVE PARK DR SUITE 4
WESTON, FL 33331 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: V
Name: RYAN, DAN
Address: 2000 ALAMEDA DE LAS PULGAS
City-St-Zip: SAN MATEO, CA 94403

Title: D
Name: CAPPEL, JEFFERY B
Address: 2000 ALAMEDA DE LAS PULGAS
City-St-Zip: SAN MATEO, CA 94403

Title: S
Name: CRAWFORD, DANIEL J
Address: 2000 ALAMEDA DE LAS PULGAS
City-St-Zip: SAN MATEO, CA 94403

Title: CEOD
Name: FRANCIS, DAN R
Address: 2000 ALAMEDA DE LAS PULGAS
City-St-Zip: SAN MATEO, CA 944039

Title: CP
Name: HAHN, JOHN G
Address: 2000 ALAMEDA DE LAS PULGAS
City-St-Zip: SAN MATEO, CA 94403

Title: CFO
Name: ANDRIAN, ELAINE D
Address: 2000 ALAMEDA DE LAS PULGAS
City-St-Zip: SAN MATEO, CA 94403

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: DANIEL J. CRAWFORD S 03/11/2010

Electronic Signature of Signing Officer or Director Date