

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006037

FILED
Mar 08, 2007
Secretary of State

Entity Name: INTERNATIONAL PLANNING GROUP INSURANCE AGENCY, INC.

Current Principal Place of Business:

4000 PONCE DE LEON BLVD.
SUITE 430
CORAL GABLES, FL 33146

New Principal Place of Business:

62 WALNUT STREET
WELLESLEY, MA 02481

Current Mailing Address:

62 WALNUT ST.
WELLESLEY, MA 02481

New Mailing Address:

62 WALNUT ST.
WELLESLEY, MA 02481

FEI Number: 04-3521435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, MARY O
4000 PONCE DE LEON BLVD.
SUITE 430
CORAL GABLES, FL 33146 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: CHRM () Delete
Name: BAKER, JON M SR.
Address: 70 BEACON ST
City-St-Zip: BOSTON, MA 02108

Title: P () Delete
Name: BAKER, JON M JR.
Address: 58 YALE ST
City-St-Zip: WINCHESTER, MA 01890

Title: T () Delete
Name: LAMB, STEVEN G JR.
Address: 205 ROLLINGHILLS DR.
City-St-Zip: E. BRIDGEWATER, MA 02333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: BAKER, JON M SR.
Address: 70 BEACON ST
City-St-Zip: BOSTON, MA 02108

Title: PD (X) Change () Addition
Name: BAKER, JON M JR.
Address: 58 YALE ST
City-St-Zip: WINCHESTER, MA 01890

Title: TD (X) Change () Addition
Name: LAMB, STEVEN G
Address: 25 ROLLING HILLS DR.
City-St-Zip: E. BRIDGEWATER, MA 02333

I hereby certify that the information supplied with this filing does not qualify for the 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: JON M BAKER

D

03/08/2007

Electronic Signature of Signing Officer or Director

Date