

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000000745

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** BEDFORD INSURANCE BROKERAGE, INC.

**Current Principal Place of Business:**

75 ROCKEFELLER PLAZA -18TH FLOOR  
NEW YORK, NY 10019

**New Principal Place of Business:**

**Current Mailing Address:**

75 ROCKEFELLER PLAZA -18TH FLOOR  
NEW YORK, NY 10019

**New Mailing Address:**

**FEI Number:** 20-1769147

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HATCH, JOHN D ESQ  
1267 BERKSHIRE LANE SUITE 200  
TARPON SPRINGS, FL 34688 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: P  
Name: CAPOBIANCO, MARIO  
Address: 20 BROOKDALE RD  
City-St-Zip: GLEN COVE, NY 11542

Title: V  
Name: PARK, DAVID  
Address: 28 SHERWOOD DR  
City-St-Zip: MOUNTAIN LAKES, NJ 07046

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: MARIO CAPOBIANCO

P

03/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date