

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002395

FILED
Mar 12, 2012
Secretary of State

Entity Name: ALLIANCE DC INSURANCE SERVICES, INC.

Current Principal Place of Business:

1660 L ST., NW SUITE #308
WASHINGTON, DC 20036

New Principal Place of Business:

1660 L ST., NW SUITE #210
WASHINGTON, DC 20036

Current Mailing Address:

1660 L ST., NW SUITE #308
WASHINGTON, DC 20036

New Mailing Address:

1660 L ST., NW SUITE #210
WASHINGTON, DC 20036

FEI Number: 20-8232744

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
TARPOON 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: C
Name: DORE', JOAN L
Address: 1660 L ST., NW SUITE #210
City-St-Zip: WASHINGTON, DC 20036

Title: CEO
Name: BUTCHER, DONALD J
Address: 1660 L ST., NW SUITE #210
City-St-Zip: WASHINGTON, DC 20036

Title: PVST
Name: DAVELER, KENNETH
Address: 1660 L ST., NW SUITE #210
City-St-Zip: WASHINGTON, DC 20036

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: DONALD J BUTCHER

CEO

03/12/2012

Electronic Signature of Signing Officer or Director

Date