

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F51856

FILED
Feb 12, 2009
Secretary of State

Entity Name: DOUG DANZIGER INSURANCE AGENCY, INC.

Current Principal Place of Business:

5461 N. FEDERAL HIGHWAY
FT LAUDERDALE, FL 333083206

New Principal Place of Business:

5461 N. FEDERAL HIGHWAY
FT LAUDERDALE, FL 333083206 US

Current Mailing Address:

5461 N. FEDERAL HIGHWAY
FT LAUDERDALE, FL 333083206

New Mailing Address:

FEI Number: 59-2240349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANZIGER, DOUGLAS
5461 NORTH FED HWY
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

DANZIGER, DOUGLAS
5461 NORTH FEDERAL HWY
FT LAUDERDALE, FL 33308 US

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

02/12/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: DANZIGER, DOUGLAS,
Address: 5461 NORTH FED HWY
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: DANZIGER, DOUGLAS,
Address: 5461 NORTH FEDERAL HWY
City-St-Zip: FT LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify 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: DOUGLAS DANZIGER

PST

02/12/2009

Electronic Signature of Signing Officer or Director

Date