

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F59182

FILED  
Apr 19, 2011  
Secretary of State

Entity Name: CHAMPIONS INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

13101 LINDEN PL. DR.  
SEMINOLE, FL 33776 US

**New Principal Place of Business:**

**Current Mailing Address:**

13799 PARK BLVD. N.  
PMB #256  
SEMINOLE, FL 33776 US

**New Mailing Address:**

FEI Number: 59-2159602      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROWAN, JAMES J.  
3839 4TH ST. NORTH  
STE 390  
SAINT PETERSBURG, FL 33703 US

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

CHARLES, LOCKE CPA  
7005 CENTRAL AVE  
SAINT PETERSBURG, FL 33710 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: CHARLES LOCKE, CPA

04/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GALEA, GEORGE W.  
Address: 13101 LINDEN PLACE DR  
City-St-Zip: SEMINOLE, FL 00000,

Title: STD  
Name: GALEA, MARY L  
Address: 13101 LINDEN PLACE DR  
City-St-Zip: SEMINOLE, FL 00000,

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: MARY L GALEA

SEC/

04/19/2011

Electronic Signature of Signing Officer or Director

Date