

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006269

Entity Name: ECI AGENCY, INC.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

517 N. SYLVANIA AVE
FORT WORTH, TX 76111

New Principal Place of Business:

Current Mailing Address:

PO BOX 1587
HURST, TX 76053

New Mailing Address:

FEI Number: 75-2727846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

NATIONAL REGISTERED AGENTS, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PATRICIA TORRES-ASSITANT SECRETARY

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LUCAS, JAMES N SR.
Address: 517 N. SULVANIA AVENUE
City-St-Zip: FORT WORTH, TX 76111

Title: ST () Delete
Name: LUCAS, JAMES N JR.
Address: 517 N. SULVANIA AVENUE
City-St-Zip: FORT WORTH, TX 76111

Title: VP () Delete
Name: SPEIR, GREGORY M
Address: 517 N. SULVANIA AVENUE
City-St-Zip: FORT WORTH, TX 76111

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: LUCAS, JAMES JR
Address: 517 N. SULVANIA AVENUE
City-St-Zip: FORT WORTH, TX 76111

Title: CFO () Change (X) Addition
Name: COLASANTE, DAVID
Address: 370 OLD COUNTRY RD
City-St-Zip: GARDEN CITY, NY 11530

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: DAVID COLASANTE

CFO

01/14/2009

Electronic Signature of Signing Officer or Director

Date