

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001259

FILED
Jan 03, 2008
Secretary of State

Entity Name: STUART INSURANCE AGENCY CORP.

Current Principal Place of Business:

1325 SATELLITE BLVD, SUITE 803
SUWANEE, GA 33024

New Principal Place of Business:

1325 SATELLITE BLVD, SUITE 803
SUWANEE, GA 30024

Current Mailing Address:

1325 SATELLITE BLVD, SUITE 803
SUWANEE, GA 33024

New Mailing Address:

1325 SATELLITE BLVD, SUITE 803
SUWANEE, GA 30024

FEI Number: 58-2422450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 E. 6TH AVE
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STUART, JAMES H.M.
Address: 1550 BEAVER RUIN ROAD, STE 200
City-St-Zip: NORCROSS, GA 30093

Title: ST () Delete
Name: TONNER, KELVIN G
Address: 1550 BEAVER RUIN ROAD, STE 200
City-St-Zip: NORCROSS, GA 30093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STUART, JAMES H.M.
Address: 1325 SATELLITE BLVD., STE. 803
City-St-Zip: SUWANEE, GA 30024

Title: ST (X) Change () Addition
Name: TONNER, KELVIN G
Address: 1325 SATELLITE BLVD., STE. 803
City-St-Zip: SUWANEE, GA 30024

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: JAMES H.M. STUART

P

01/03/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date