

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G09703

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: SOUTHWEST FLORIDA INSURANCE ASSOCIATES, INC.

## Current Principal Place of Business:

8695 COLLEGE PARKWAY  
#222  
FT MYERS, FL 33919 US

## New Principal Place of Business:

8695 COLLEGE PARKWAY  
#2010  
FT MYERS, FL 33919 US

## Current Mailing Address:

PO BOX 07009  
FT MYERS, FL 33919 US

## New Mailing Address:

FEI Number: 59-2235946      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITLOCK, ROBERT H.  
8695 COLLEGE PARKWAY  
#222  
FT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

WHITLOCK, ROBERT H.  
8695 COLLEGE PARKWAY  
#2010  
FT MYERS, FL 33919 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:

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WHITLOCK, ROBERT H.,  
Address: 14241 BAY DR  
City-St-Zip: FORT MYERS, FL 33919

Title: EVD ( ) Delete  
Name: WHITLOCK, LAURA BETH,  
Address: 14241 BAY DR  
City-St-Zip: FORT MYERS, FL 33919

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ROBERT H. WHITLOCK

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date