2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G23827

Entity Name: ALL INSURANCE OF MARTIN COUNTY, INC.

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3180 SE DIXIE HWY STUART, FL 34997

Current Mailing Address: New Mailing Address:

3180 SE DIXIE HWY STUART, FL 34997

FEI Number: 59-2257335 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DEVERCELLY, ANTHONY DEVERCELLY, ANTHONY K
1326 SW SULTAN DRIVE 2639 SE MORNINGSIDE BLVD
PORT SAINT LUCIE, FL 34953 US PORT SAINT LUCIE, FL 34952 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: ANTHONY K. DE VERCELLY 01/08/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PVTS** () Delete Title: **PVTS** (X) Change () Addition DEVERCELLY, ANTHONY Name: Name: DEVERCELLY, ANTHONY K 1326 SW SULTAN DRIVE 2639 SE MORNINGSIDE BLVD Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: PORT SAINT LUCIE, FL 34952

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: ANTHONY K. DE VERCELLY PRES 01/08/2009