2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G30573

Entity Name: GARY P. LAWRENCE INSURANCE CO.

FILED Apr 07, 2011 Secretary of State

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

8401 LAKE WORTH RD 12773 W. FOREST HILL BLVD

31 #104

LAKE WORTH, FL 33467 WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

8401 LAKE WORTH RD 12773 W. FOREST HILL BLVD #104

LAKE WORTH, FL 33467 WELLINGTON, FL 33414

FEI Number: 59-2274628 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:

LAWRENCE, GARY P.

8401 LAKE WORTH RD

12773 W. FOREST HILL BLVD

#104

LAKE WORTH, FL 33467 US

WELLINGTON, FL 33414 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: GARY P. LAWRENCE 04/07/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSTD

Name: LAWRENCE, GARY P.

Address: 12773 W. FOREST HILL BLVD 104

City-St-Zip: WELLINGTON, FL 33414

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: GARY P. LAWRENCE PRES 04/07/2011