

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60350

FILED
Mar 16, 2009
Secretary of State

Entity Name: BRUNER'S INSURANCE AGENCY OF EASTLAKE, INCORPORATED

Current Principal Place of Business:

9718 N 56TH ST
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

9718 N 56TH ST
TAMPA, FL 33617

New Mailing Address:

FEI Number: 59-2543963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LILLY, GARY P
9718 N. 56TH ST.
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

HOLCOMB, VICTOR W ESQ
201 N. ARMENIA AVE
TAMPA, FL 33609 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: VICTOR W HOLCOMB

03/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LILLY, GARY P.,
Address: 9718 N. 56TH ST.
City-St-Zip: TAMPA, FL 33617

Title: VP (X) Delete
Name: FOLEY, JANETTE M
Address: 9718 N. 56TH ST.
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FOLEY, JANETTE D
Address: 9718 N. 56TH ST.
City-St-Zip: TAMPA, FL 33617

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: JANETTE D FOLEY

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date