## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H81067

FILED Apr 09, 2007 Secretary of State

Entity Name: BUTTERFIELD INSURANCE AGENCY, INC.

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1600 PARK SUITE 2 ORANGE F	AVE PARK, FL 32073	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1600 PARK SUITE 2 ORANGE F	AVE PARK, FL 32073	US			
FEI Number:	59-2591106 F	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1600 PARK STE 2	ELD, FRANK AVENUE PARK, FL 32073	US			
The above in the State		mits this statement for the p	purpose of changing its registered	I office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Ag	ent	Date	
Election Cam	paign Financing Tr	ust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( ) De BUTTERFIELD, FR 1600 PARK AVE., # ORANGE PARK, FI	ANK,, JR ≉2	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANK BUTTERFIELD DP 04/09/2007