2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2012
Secretary of State

DOCUMENT# H82871

Entity Name: RIVARD INSURANCE AGENCY, INC.

Current Principal Place of Business:

C/O MARTIN G. RIVARD
1014 GATEWAY BLVD, SUITE 107
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

C/O MARTIN G. RIVARD
1014 GATEWAY BLVD, SUITE 107
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 59-2585797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIVARD, MARTIN G PRES
1014 GATEWAY BLVD, SUITE 107
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: MR
Name: RIVARD, MARTIN G PRES.
Address: 1014 GATEWAY BLVD, SUITE 107
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MRS
Name: RIVARD, CHRISTINE M V P
Address: 1014 GATEWAY BLVD, SUITE 107
City-St-Zip: BOYNTON BEACH, FL 33426

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: MARTIN RIVARD PRES 02/20/2012

Electronic Signature of Signing Officer or Director — Date