

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J23975

FILED
Feb 16, 2009
Secretary of State

Entity Name: DAN SAWYER INSURANCE AGENCY, INC.

Current Principal Place of Business:

% HOWARD DANIEL SAWYER, JR.
1797 N UNIVERSITY DR
PLANTATION, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

% HOWARD DANIEL SAWYER, JR.
1797 N UNIVERSITY DR
PLANTATION, FL 33322 US

New Mailing Address:

FEI Number: 59-2712748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAWYER, HOWARD DANIEL, JR.
1797 N. UNIVERSITY DR
PLANTATION, FL 33322 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAWYER, HOWARD DANIE, L, JR
Address: 1797 N UNIVERSITY DR
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HOWARD DANIEL SAWYER JR

PD

02/16/2009

Electronic Signature of Signing Officer or Director

_____ Date