

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J91577

FILED  
Jan 05, 2010  
Secretary of State

**Entity Name:** ALAN B. EDWARDS INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

4705 SW 148TH AVE  
STE 103  
DAVIE, FL 333302129 US

**New Principal Place of Business:**

**Current Mailing Address:**

6304 SARATOGA CIR  
DAVIE, FL 33331 US

**New Mailing Address:**

4705 SW 148TH AVE  
STE 103  
DAVIE, FL 333302129 US

**FEI Number:** 65-0027041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDWARDS, ALAN B.  
4705 SW 148TH AVE  
STE 103-104  
DAVIE, FL 33330 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: P  
Name: EDWARDS, ALAN B.  
Address: 4705 SW 148TH AVE STE 103  
City-St-Zip: DAVIE, FL 333302129 US

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:** ALAN B EDWARDS

PRES

01/05/2010

Electronic Signature of Signing Officer or Director

Date