2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K46895

FILED Apr 21, 2010 Secretary of State

Entity Name: INSURANCE WORLD FRANCHISOR, INC.

Current Principal Place of Business: New Principal Place of Business:

830 NW 13 STREET

GAINESVILLE, FL 32601 US

Current Mailing Address: New Mailing Address:

830 NW 13 STREET

GAINESVILLE, FL 32601 US

FEI Number: 59-2918935 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HAZY, VICTOR JR 830 NW 13TH STREET

GAINESVILLE, FL 32601 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP

Name: SMITH, STEPHEN M.

Address: 566 INTERNATIONAL SPEEDWAY BLVD.

City-St-Zip: DAYTONA BCH., FL 32014

Title: S/T

Name: HAZY, VICTOR
Address: 830 NW 13TH STREET
City-St-Zip: GAINESVILLE, FL

Title: F

Name: DOBRY, HAL

Address: 10 MARTINIQUE COVE City-St-Zip: PALM BCH GARDENS, FL

Title: VP

 Name:
 MALONE, JAMES M.

 Address:
 1907 BLANDING BLVD.

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: [

Name: LUCAS, STEVEN W
Address: 214 TIMBERCOVE CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: VP

Name: ENLOW, LOWELL

Address: 1210 S. WASHINGTON AVENUE

City-St-Zip: TITUSVILLE, FL 32780

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: VICTOR HAZY, JR. SEC. 04/21/2010