

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K69947

FILED
May 06, 2008
Secretary of State

Entity Name: ALEXIS HARRIS INSURANCE AGENCY, INC.

Current Principal Place of Business:

4900 W ATLANTIC BLVD
STE 1
MARGATE, FL 33063 US

New Principal Place of Business:

Current Mailing Address:

4900 W ATLANTIC BLVD
STE 1
MARGATE, FL 33063 US

New Mailing Address:

FEI Number: 65-0129812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, ALEXIS G.
4900 W ATLANTIC BLVD
STE 1
MARGATE, FL 33063 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HARRIS, ALEXIS G.,
Address: 4900 W ATLANTIC BLVD STE 1
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HARRIS, ALEXIS G.,
Address: 4900 W ATLANTIC BLVD STE 1
City-St-Zip: MARGATE, FL 33063

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: ALEXS G. HARRIS

PRES

05/06/2008

Electronic Signature of Signing Officer or Director

Date