

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K76120

FILED
Jul 07, 2009
Secretary of State

Entity Name: SANDY WASSON & ASSOCIATES INSURANCE, INC.

Current Principal Place of Business:

11309 STARKEY RD
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

P O BOX 10437
LARGO, FL 337730437

New Mailing Address:

FEI Number: 59-2939267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WASSON, CHARLES L
10053 -85TH ST N.
LARGO, FL 33777 US

Name and Address of New Registered Agent:

WASSON III, CHARLES L
10053 -85TH ST N.
LARGO, FL 33777 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: CHARLES L. WASSON III

07/07/2009

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: CDT () Delete
Name: WASSON, SANDRA
Address: 8381 56TH WAY NORTH
City-St-Zip: PINELLAS PARK, FL 33781

Title: VPDS () Delete
Name: WASSON, CHARLES
Address: 8381 56TH WAY NORTH
City-St-Zip: PINELLAS PARK, FL 33781

Title: P () Delete
Name: WASSON, CHARLES III
Address: 10053 85TH ST NO
City-St-Zip: LARGO, FL 33781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES L. WASSON III

PRES

07/07/2009

Electronic Signature of Signing Officer or Director

Date