

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L00279

FILED
Feb 06, 2012
Secretary of State

Entity Name: MR. AUTO INSURANCE OF CRYSTAL RIVER, INC.

Current Principal Place of Business:

720 NE HWY 19
CRYSTAL RIVER, FL 34429 US

New Principal Place of Business:

Current Mailing Address:

720 NE HWY 19
CRYSTAL RIVER, FL 34429 US

New Mailing Address:

FEI Number: 59-2956028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGLEY, RACHAEL
1704 N. COMMON PT
LECANTO, FL 34461 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

OFFICERS AND DIRECTORS:

Title: P
Name: LANGLEY, RACHAEL
Address: 1704 N. COMMON PT
City-St-Zip: LECANTO, FL 34461

Title: VP
Name: BARD, JOHN J SR
Address: 1230 SE KINGSBAY DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: DIR
Name: BARD, CARLA
Address: 1230 SE KINGSBAY DR
City-St-Zip: CRYSTAL RIVER, FL 34429

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: CARLA BARD

DIR

02/06/2012

Electronic Signature of Signing Officer or Director

Date