

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L18295

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** TRANS-FLORIDA INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

7821 DEERCREEK CLUB ROAD  
SUITE 101  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

7821 DEERCREEK CLUB ROAD  
SUITE 101  
JACKSONVILLE, FL 32256

**New Mailing Address:**

**FEI Number:** 59-3025211

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LANDSCHOOT, CARLOTTA  
7821 DEERCREEK CLUB ROAD  
SUITE 101  
JACKSONVILLE, FL 32256 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: PD  
Name: LANDSCHOOT, CARLOTTA W  
Address: 3047 BISHOP ESTATES RD  
City-St-Zip: JACKSONVILLE, FL 32259

Title: STD  
Name: HARRIS, MELANIE W  
Address: 2807 EVERCHARM PLACE  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VPD  
Name: WATSON III, WILLIAM A  
Address: 3430 CORMORANT COVE, DR.  
City-St-Zip: JACKSONVILLE, FL 32223

Title: ST  
Name: WATSON, JANELLE W  
Address: 2807 EVERCHARM PLACE  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D  
Name: WATSON, JR., WILLIAM A  
Address: 2807 EVERCHARM PLACE  
City-St-Zip: JACKSONVILLE, FL 32257

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: WILLIAM A WATSON JR

D

03/20/2012

Electronic Signature of Signing Officer or Director

Date