

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L27933

FILED
Feb 18, 2011
Secretary of State

Entity Name: ROUNTREE INSURANCE AGENCY, INC.

Current Principal Place of Business:

C/O BARBARA N. ROUNTREE
8204 NW 80T ST
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

C/O BARBARA N. ROUNTREE
8204 NW 80T ST
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 65-0153621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUNTREE, BARBARA N.
8204 NW80TH ST
TAMARAC, FL 33321 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: PRES
Name: ROUNTREE, BARBARA N.
Address: 8204 NW80TH ST
City-St-Zip: TAMARAC, FL 33321

Title: VP
Name: ROUNTREE, JAMES W.
Address: 8204 NW 80TH ST
City-St-Zip: TAMARAC, FL 33321

Title: TRES
Name: ROUNTREE, JAMES S.
Address: 8204 NW 80TH ST
City-St-Zip: TAMARAC, FL 33321

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: BARBARA NAN ROUNTREE

PRES

02/18/2011

Electronic Signature of Signing Officer or Director

Date