

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L57774

FILED
Jan 05, 2011
Secretary of State

Entity Name: SALE INSURANCE AGENCY, INC.

Current Principal Place of Business:

C/O ROBERT H. SALE
309 S. TENNESSEE AVENUE
LAKELAND, FL 338014617 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1
309 S. TENNESSEE AVENUE
LAKELAND, FL 33802 US

New Mailing Address:

FEI Number: 59-2994812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALE, ROBERT H OWNER
309 S. TENNESSEE AVENUE
LAKELAND, FL 33801 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: D
Name: SALE, HAROLD A
Address: 309 S. TENNESSEE AVENUE
City-St-Zip: LAKELAND, FL

Title: D
Name: SALE, HAROLD A JR
Address: 309 S. TENNESSEE AVE.
City-St-Zip: LAKELAND, FL 33801

Title: D
Name: SALE, ROBERT H
Address: 309 S. TENNESSEE AVENUE
City-St-Zip: LAKELAND, FL 33801

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: ROBERT H. SALE

OWNE

01/05/2011

Electronic Signature of Signing Officer or Director

Date