

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L76263

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: DON PECKHAM INSURANCE, INC.

**Current Principal Place of Business:**

3718 40TH STREET SOUTHWEST  
LEHIGH ACRES, FL 33976 US

**New Principal Place of Business:**

**Current Mailing Address:**

3718 40TH STREET SOUTHWEST  
LEHIGH ACRES, FL 33976 US

**New Mailing Address:**

FEI Number: 65-0201365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PECKHAM, DON  
3718 40TH STREET SOUTHWEST  
LEHIGH ACRES, FL 33971 US

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

PECKHAM, DON  
3718 40TH STREET SOUTHWEST  
LEHIGH ACRES, FL 33976 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: DON PECKHAM

01/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PECKHAM, DON,  
Address: 3718 40TH STREET SOUTHWEST  
City-St-Zip: LEHIGH ACRES, FL 33976

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: DON PECKHAM

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date