

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L84206

FILED
Apr 16, 2011
Secretary of State

Entity Name: COMMERCIAL & HOME INSURANCE, INC.

Current Principal Place of Business:

5635 49TH ST. N.
SAINT PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

5635 49TH ST N
ST. PETERSBURG, FL 33709 US

New Mailing Address:

5635 49TH ST. N.
SAINT PETERSBURG, FL 33709 US

FEI Number: 59-3016484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVISON, WILLIAM F.
1200 53RD STREET NORTH
ST. PETERSBURG, FL 33710 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: DAVISON, WILLIAM F.
Address: 1200 53RD STREET N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: STD
Name: DAVISON, EDNA M.
Address: 1200 53RD STREET N.
City-St-Zip: ST. PETERSBURG, FL 33710

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: EDNA M DAVISON

STD

04/16/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date