

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L88317

FILED
Apr 08, 2008
Secretary of State

Entity Name: SBS INSURANCE AGENCY OF FLORIDA, INC.

Current Principal Place of Business:

980 N FEDERAL HWY
SUITE 310
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

980 N FEDERAL HWY
SUITE 310
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 59-3025829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, STEVEN C
980 N FEDERAL HWY
STE 310
BOCA RATON, FL 33432 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOC () Delete
Name: LEEDS, MARSHALL
Address: 980 N FEDERAL HWY STE 310
City-St-Zip: BOCA RATON, FL 33432

Title: TS () Delete
Name: JACOBS, STEVEN
Address: 980 N FEDERAL HWY STE 310
City-St-Zip: BOCA RATON, FL 33432

Title: P () Delete
Name: BENTLEY, GREG
Address: 980 N FEDERAL HWY STE 310
City-St-Zip: BOCA RATON, FL 33432

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SMITH, STAN
Address: 980 N FEDERAL HWY STE 310
City-St-Zip: BOCA RATON, FL 33432

Title: VP () Change (X) Addition
Name: FENIGER, DAN
Address: 980 N FEDERAL HWY STE 310
City-St-Zip: BOCA RATON, FL 33432

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: STEVEN JACOBS

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04/08/2008

Electronic Signature of Signing Officer or Director

Date