2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90824

Entity Name: ALL INSURANCE SOURCE INC.

FILED Jan 19, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3885 20TH ST, STE C 2601 20TH ST, STE C VERO BEACH, FL 32960 VERO BEACH, FL 32960

Current Mailing Address: New Mailing Address:

3885 20TH ST, STE C 2601 20TH ST, STE C VERO BEACH, FL 32960 VERO BEACH, FL 32960

FEI Number: 65-0210977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MEIER, ANNA-LISA 6163 KARI DRIVE MELBOURNE, FL 32940

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

US

Date

OFFICERS AND DIRECTORS:

Title: DF

 Name:
 MEIER, ANNA-LISA

 Address:
 6163 KARI DRIVE

 City-St-Zip:
 MELBOURNE, FL 32940

Title: DVP

Name: HEDGES, MERLE Address: 9 CACHE CAY

City-St-Zip: VERO BEACH, FL 32963

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: ANNA-LISA MEIER DP 01/19/2011