

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M64341

FILED
Apr 07, 2012
Secretary of State

Entity Name: A-ALL INSURANCE OF WPB, INC.

Current Principal Place of Business:

787 NORTHLAKE BLVD.
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

787 NORTHLAKE BLVD.
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 65-0031566 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GIBB, THOMAS D 3RD
787 NORTHLAKE BLVD.
NORTH PALM BEACH, FL 33408 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: PRES
Name: GIBB, RUTH
Address: 787 NORTHLAKE BLVD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VP
Name: GIBB, THOMAS D III
Address: 787 NORTHLAKE BLVD
City-St-Zip: NORTH PALM BEACH, FL 33408

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: THOMAS GIBB

VP

04/07/2012

Electronic Signature of Signing Officer or Director

Date