2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2009
Secretary of State

DOCUMENT# M82899

Entity Name: MOULDER INSURANCE AGENCY INC.

Current Principal Place of Business:

% JENNIFER L. KOPPEL
1314 N. TYNDALL PARKWAY
PANAMA CITY, FL 32404

New Principal Place of Business:

Current Mailing Address:

% JENNIFER L. KOPPEL
1314 N. TYNDALL PARKWAY
PANAMA CITY, FL 32404

New Mailing Address:

FEI Number: 59-2889086 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOPPEL, JENNIFER L
1314 N. TYNDALL PARKWAY
PANAMA CITY, FL 32404 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: DP ( ) Delete
Name: KOPPEL, JENNIFER L.,
Address: 1314 N. TYNDALL PARKWAY
City-St-Zip: PANAMA CITY, FL 32404 US

Title: VP ( ) Delete
Name: GIRDNER, VIRGINIA C
Address: 181 SEMINOLE TRAIL
City-St-Zip: PENSACOLA, FL 32506

Title: S ( ) Delete
Name: MOULDER, JASON A
Address: 8131 BLANCHE DRIVE
City-St-Zip: PANAMA CITY, FL 32404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JENNIFER L. KOPPEL DP 03/28/2009
Electronic Signature of Signing Officer or Director — Date