## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M87454

FILED Mar 17, 2011 Secretary of State

Entity Name: U.S.A. INSURANCE MARKETING INCORPORATED

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

1525 NW 3RD STREET SUITE #8

DEERFIELD BEACH, FL 33442

Current Mailing Address: New Mailing Address:

33 N. CENTRAL AVE SUITE 317 MEDFORD, OR 97501

FEI Number: 65-0085264 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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: SKIFF, THOMAS A

Address: 6201 PRESIDENTIAL COURT City-St-Zip: FORT MYERS, FL 33919

Title: VP

Name: PITBLADDO, RICHARD B
Address: 6201 PRESIDENTIAL COURT
City-St-Zip: FORT MYERS, FL 33919

Title: VP

Name: DINSMORE, MARK S Address: 6201 PRESIDENTIAL COURT City-St-Zip: FORT MYERS, FL 33919

Title: TREA

Name: YOST, DAVID A

Address: 33 N. CENTRAL AVE SUITE 317

City-St-Zip: MEDFORD, OR 97501

Title: VPAS

Name: HENSLEY, STEVEN A
Address: 6201 PRESIDENTIAL COURT
City-St-Zip: FORT MYERS, FL 33919

Title: VP/S

Name: SCHMEDLEN, DANIEL G
Address: 6201 PRESIDENTIAL COURT
City-St-Zip: FORT MYERS, FL 33919

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: DAVID YOST TREA 03/17/2011