

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M92985

FILED
Jan 17, 2011
Secretary of State

Entity Name: FIORELLA INSURANCE AGENCY, INC.

Current Principal Place of Business:

515 SW CENTRAL PARKWAY
STUART, FL 34994 US

New Principal Place of Business:

Current Mailing Address:

515 SW CENTRAL PARKWAY
STUART, FL 34994 US

New Mailing Address:

FEI Number: 65-0067142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIORELLA, NICK
1410 N.W. FORK ROAD
STUART, FL 34994 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: D
Name: FIORELLA, NICK
Address: 1410 N.W. FORK ROAD
City-St-Zip: STUART, FL 34994

Title: D
Name: FIORELLA, SHARON
Address: 1410 N.W. FORK ROAD
City-St-Zip: STUART, FL 34994

Title: V
Name: FIORELLA, JOHN NICHOLAS JR
Address: 515 SE CENTRAL PARKWAY
City-St-Zip: STUART, FL 34994

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: NICK FIORELLA

_____ Electronic Signature of Signing Officer or Director

PRES

01/17/2011

_____ Date