

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029187

Entity Name: D.G. INSURANCE GROUP, INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

6139 B LAKE WORTH RD
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

6139 B LAKE WORTH RD
SUITE D
LAKE WORTH, FL 33463

New Mailing Address:

6139 B LAKE WORTH RD
LAKE WORTH, FL 33463

FEI Number: 65-0988731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUAREZ, DIANE
6139 B LAKE WORTH RD
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

SUAREZ, DIANE N
6139 B LAKE WORTH RD
LAKE WORTH, FL 33463 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: DIANE N SUAREZ

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SUAREZ, DIANE
Address: 6139 B LAKE WORTH
City-St-Zip: LAKE WORTH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SUAREZ, DIANE
Address: 6139 B LAKE WORTH
City-St-Zip: LAKE WORTH, FL 33463

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: DIANE N SUAREZ

MRS

03/30/2009

Electronic Signature of Signing Officer or Director

Date