

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078875

Entity Name: SOUTH BAY INSURANCE, INC.

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

321 US HWY 41 NORTH
RUSKIN, FL 33570

New Principal Place of Business:

319 US HWY 41 N STE A
RUSKIN, FL 33570

Current Mailing Address:

319 US HIGHWAY 41 N, SUITE A
RUSKIN, FL 33570

New Mailing Address:

FEI Number: 59-3664064 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHAVEZ, ADRIANA
319 US HIGHWAY 41 N, SUITE A
RUSKIN, FL 33570 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: D () Delete
Name: CHAVEZ, ADRIANA
Address: 534 RED MANGROVE LANE
City-St-Zip: APOLLO BEACH, FL 33572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ADRIANA CHAVEZ

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date