

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000103694

Entity Name: JOY MORSE INSURANCE AGENCY, INC.

FILED
Jan 30, 2009
Secretary of State

Current Principal Place of Business:

2152 E. COUNTY ROAD 540 A
LAKELAND, FL 33813

New Principal Place of Business:

5727 US HWY 98 S
LAKELAND, FL 33812

Current Mailing Address:

2152 E. COUNTY ROAD 540 A
LAKELAND, FL 33813

New Mailing Address:

5727 US HWY 98 S
LAKELAND, FL 33812

FEI Number: 59-3690552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORSE, JOY E
2152 E. COUNTY ROAD 540 A
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

MORSE, JOY E
5727 US HWY 98 S
LAKELAND, FL 33812 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:

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MORSE, JOY E
Address: 2152 E. COUNTY ROAD 540 A
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MORSE, JOY E
Address: 5727 US HWY 98 S
City-St-Zip: LAKELAND, FL 33812

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: JOY E MORSE

CEO

01/30/2009

Electronic Signature of Signing Officer or Director

Date