

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000103709

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** CENTURION INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

3904 WEST 12 AVENUE  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

710 EAST 43 STREET  
HIALEAH, FL 33013

**New Mailing Address:**

**FEI Number:** 65-1052899

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GONZALEZ, JOSE M  
710 EAST 43 STREET  
HIALEAH, FL 33013 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:** PD  
**Name:** GONZALEZ, JOSE M  
**Address:** 710 EAST 43 STREET  
**City-St-Zip:** HIALEAH, FL 33013

**Title:** D  
**Name:** GONZALEZ, ROSA  
**Address:** 710 EAST 43 STREET  
**City-St-Zip:** HIALEAH, FL 33013

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:** JOSE M GONZALEZ

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04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date