

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000022546

FILED
Apr 02, 2009
Secretary of State

Entity Name: DIAN ROBINSON INSURANCE AGENCY, INC.

Current Principal Place of Business:

1240 W 23 STREET
PANAMA CITY, FL 32405

New Principal Place of Business:

1240 W 23 STREET
PANAMA CITY, FL 32405

Current Mailing Address:

1240 W 23 STREET
PANAMA CITY, FL 32405

New Mailing Address:

1240 W 23 STREET
PANAMA CITY, FL 32405

FEI Number: 59-3718149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOYD, CECILIA
1007 JENKS AVENUE
PANAMA CITY, FL 32401 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: ROBINSON, DIAN
Address: 1240 W 23 STREET
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROBINSON, DIAN
Address: 1240 W 23 STREET
City-St-Zip: PANAMA CITY, FL 32405

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: DIAN ROBINSON

PRES

04/02/2009

Electronic Signature of Signing Officer or Director

Date