2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# P01000101916

Entity Name: EMERALD SPRINGS INSURANCE AGENCY, INC.

Current Principal Place of Business:

99 9TH ST NORTH
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

P O BOX 9
NAPLES, FL 34106

New Mailing Address:

FEI Number: 59-3673877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORAN, DAVID M
4762 CAPRI DR
NAPLES, FL 341032509 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: DAVID MORAN

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: HOLBROOK, J. CRAIG
Address: 1993 ISLA DE PALMA CR
City-St-Zip: NAPLES, FL 34119

Title: DVS ( ) Delete
Name: HOLBROOK, JILL
Address: 1993 ISLA DE PALMA CR
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JEFFERY C HOLBROOK PRES 10/13/2009

Electronic Signature of Signing Officer or Director — Date