2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003850

Entity Name: TARR & ASSOC. INSURANCE, INC.

FILED Mar 03, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10210 289TH ST E 10420 N MCKINLEY DRIVE MYAKKA CITY, FL 34251

APT 2602

TAMPA, FL 33612

Current Mailing Address: New Mailing Address:

10210 289TH STREET EAST 10420 N MCKINLEY DRIVE MYAKKA CITY, FL 34251

APT 2602 TAMPA, FL 33612

FEI Number: 94-3414819 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TARR, PAMELA TARR, PAMELA 10210 289TH STREET EAST 10420 N MCKINLEY DR MYAKKA CITY, FL 34251 APT 2602 TAMPA, FL 33612 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: PAMELA TARR 03/03/2010

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

TARR, PAMELA Name:

10210 289TH STREET EAST Address: City-St-Zip: MYAKKA CITY, FL 34251 US

Title: VPS

Name: VINIARD, RAF 1389 HIGHWAY 213 Address: COVINGTON, GA 30014 US City-St-Zip:

Title: SEC

SCHWARZ, KARY Name: 3408-155TH AVE, EAST Address: City-St-Zip: PARRISH, FL 34219 US

Title: TREA

TARR, ALEXANDER Name:

Address: 10420 N MCKINLEY DR APT 2602

City-St-Zip: **TAMPA, FL 33612 US**

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: PAMELA TARR **PRES** 03/03/2010