

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000014595

FILED  
Jan 27, 2009  
Secretary of State

Entity Name: CROSS PURPOSES INSURANCE, INC.

## Current Principal Place of Business:

2126 BRENT PLACE  
PALM HARBOR, FL 34683

## New Principal Place of Business:

4915 W CYPRESS ST, SUITE 200  
TAMPA, FL 33607

## Current Mailing Address:

2126 BRENT PLACE  
PALM HARBOR, FL 34683

## New Mailing Address:

P O BOX 24656  
TAMPA, FL 33607

FEI Number: 32-0002074

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCOY, GEORGE H  
2126 BRENT PLACE  
PALM HARBOR, FL 34683 US

## Name and Address of New Registered Agent:

MCCOY, GEORGE H  
1911 PINK GUARA CT  
TRINITY, FL 34655 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:

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MCCOY, GEORGE H  
Address: 2126 BRENT PLACE  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: MCCOY, JENNIFER D  
Address: 2126 BRENT PLACE  
City-St-Zip: PALM HARBOR, FL 34683

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MCCOY, GEORGE H  
Address: 1911 PINK GUARA CT  
City-St-Zip: TRINITY, FL 34655

Title: D (X) Change ( ) Addition  
Name: MCCOY, JENNIFER D  
Address: 1911 PINK GUARA CT  
City-St-Zip: TRINITY, FL 34655

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: GEORGE H MCCOY

PRES

01/27/2009

Electronic Signature of Signing Officer or Director

Date