# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 23, 2009**
**Secretary of State**

DOCUMENT# P02000044125

**Entity Name:** MOOREHEAD PROFESSIONAL INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

3145 W VINE ST
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

3145 W VINE ST
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number: 04-3650242** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MOOREHEAD, JIM / MARY
3145 W VINE ST
KISSIMMEE, FL 34741 US

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

MOOREHEAD, JIM / MARY
548 FLOWER FIELDS LANE
ORLANDO, FL 32824 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: 03/23/2009
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: MOOREHEAD, MARY
Address: 548 FLOWER FIELDS LANE
City-St-Zip: ORLANDO, FL 32824

Title: VP ( ) Delete
Name: MOOREHEAD, JAMES
Address: 548 FLOWER FIELDS LANE
City-St-Zip: ORLANDO, FL 32824

**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: MARY MOOREHEAD P 03/23/2009
Electronic Signature of Signing Officer or Director — Date