

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000065381

FILED
Feb 07, 2012
Secretary of State

Entity Name: ELITE FLORIDA INSURANCE, INC.

Current Principal Place of Business:

4512 N FLAGLER DRIVE
SUITE 304
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

4512 N FLAGLER DRIVE
SUITE 304
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 04-3682451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOROWITZ, MICHAEL S PRES.
4512 N FLAGLER DRIVE
SUITE 304
WEST PALM BEACH, FL 33407 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

OFFICERS AND DIRECTORS:

Title: P
Name: HOROWITZ, MICHAEL S
Address: 113 WATERFORD DRIVE
City-St-Zip: JUPITER, FL 33458

Title: S
Name: HOROWITZ, DEBRA L
Address: 3379 EIFFEL DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VP
Name: HOROWITZ, SHEILA B
Address: 3379 EIFFEL DR
City-St-Zip: WEST PALM BEACH, FL 33417

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: MICHAEL HOROWITZ

P

02/07/2012

Electronic Signature of Signing Officer or Director

Date