

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090513

FILED
Apr 21, 2006
Secretary of State

Entity Name: BO GREENE INSURANCE AGENCY INC.

Current Principal Place of Business:

5318 SW 91ST TERR., SUITE A
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5318 SW 91ST TERR., SUITE A
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 02-0639425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, KELLI ARNOLD
10207 SW 52ND AVENUE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

GREENE, KELLI ARNOLD
2836 SW 92ND TERRACE
GAINESVILLE, FL 32608 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: KELLI ARNOLD GREENE

04/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GREENE, JAMES JR.
Address: 4740 SW 103RD WAY
City-St-Zip: GAINESVILLE, FL 32608

Title: VD () Delete
Name: GREENE, KELLI ARNOLD
Address: 4740 SW 103RD WAY
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GREENE, JAMES JR.
Address: 2836 SW 92ND TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: VD (X) Change () Addition
Name: GREENE, KELLI ARNOLD
Address: 2836 SW 92ND TERRACE
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLI ARNOLD GREENE

VD

04/21/2006

Electronic Signature of Signing Officer or Director

Date