2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095024

Entity Name: BATTAGLIA INSURANCE GROUP, INC.

FILED Aug 28, 2008 Secretary of State

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

8250 BRYAN DAIRY RD 13115 SPING HILL BLVD

SPRING HILL BLVD, FL 34609 100 LARGO, FL 33777

New Mailing Address: Current Mailing Address:

8250 BRYAN DAIRY RD PO BOX 9637

TREASURE ISLAND, FL 33740 LARGO, FL 33777

FEI Number: 05-0536757 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:

BATTAGLIA, BRENDA L BATTAGLIA, BRENDA L 13115 SPRING HILL DR 8250 BRYAN DAIRY RD US SPRING HILL, FL 34609

100 LARGO, FL 33777 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: 08/28/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete BATTAGLIA, BRENDA L BATTAGLIA, BRENDA L Name: Name:

8250 BRYAN DAIRY RD SUITE 100 13115 SPRING HILL DR Address: Address: City-St-Zip: LARGO, FL 33777 City-St-Zip: SPRING HILL, FL 34609

() Delete Title: Title: (X) Change () Addition Name: BATTAGLIA, BRENDA L Name: BATTAGLIA, BRENDA L

8250 BRYAN DAIRY RD SUITE 100 13115 SPRING HILL DR Address: Address: LARGO, FL 33777 SPRING HILL, FL 34609 City-St-Zip: City-St-Zip:

Title: Title: TRFA () Delete TRFA (X) Change () Addition

BATTAGLIA, BRENDA L BATTAGLIA, BRENDA L Name: Name: 8250 BRYAN DAIRY RD SUITE 100 13115 SPRING HILL Address: Address: City-St-Zip: LARGO, FL 33777 City-St-Zip: SPRING HILL, FL 34609

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: BRENDA L. BATTAGLIA DIR 08/28/2008