## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000099261

Entity Name: SCHILLINGER INSURANCE CENTER OF VENICE, INC.

FILED May 03, 2007 Secretary of State

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

258 TAMIAMI TRAIL 555 E VENICE AVENUE SOUTH VENICE, FL 34285 VENICE, FL 34285

Current Mailing Address: New Mailing Address:

258 TAMIAMI TRAIL 555 E VENICE AVENUE SOUTH VENICE, FL 34285 VENICE, FL 34285

FEI Number: 13-4211052 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:

SCHILLINGER, DONALD E
258 TAMIAMI TRAIL S
VENICE, FL 34285 US
SCHILLINGER, DONALD E
555 E VENICE AVE
VENICE, FL 34285 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: 05/03/2007

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:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: (X) Change ( ) Addition SCHILLINGER, DONALD E SCHILLINGER, DONALD E Name: Name: 258 TAMIAMI TRAIL 555 E VENICE AVE Address: Address: City-St-Zip: SOUTH VENICE, FL 34285 City-St-Zip: VENICE, FL 34285

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

 Name:
 SCHILLINGER, LINDA L
 Name:
 SCHILLINGER, LINDA L

 Address:
 258 TAMIAMI TRAIL
 Address:
 555 E VENICE AVE

 City-St-Zip:
 SOUTH VENICE, FL 34285
 City-St-Zip:
 VENICE, FL 34285

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: DONALD E. SCHILLINGER PRES 05/03/2007