

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065882

Entity Name: C.A.R. II INSURANCE, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

99 OLD KINGS ROAD, SOUTH
SUITE 3
FLAGLER BEACH, FL 32136

Current Mailing Address:

99 OLD KINGS ROAD, SOUTH
SUITE 3
FLAGLER BEACH, FL 32136

FEI Number: 57-1174067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

17 OLD KINGS ROAD, N.
SUITE J
PALM COAST, FL 32137

New Mailing Address:

17 OLD KINGS ROAD, N.
SUITE J
PALM COAST, FL 32137

Name and Address of Current Registered Agent:

CONSER, ANNA G
99 OLD KINGS ROAD, SOUTH
SUITE 3
FLAGLER BEACH, FL 32136 US

Name and Address of New Registered Agent:

CONSER, ANNA G
17 OLD KINGS ROAD, N.
SUITE J
PALM COAST, FL 32137 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: ANNA CONSER

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: CONSER, ANNA G
Address: 99 OLD KINGS ROAD, SOUTH, SUITE 3
City-St-Zip: FLAGLER BEACH, FL 32136

Title: VSD () Delete
Name: CONSER, ROBERT W
Address: 99 OLD KINGS ROAD, SOUTH, SUITE 3
City-St-Zip: FLAGLER BEACH, FL 32136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: CONSER, ANNA G
Address: 17 OLD KINGS ROAD, NORTH, SUITE J
City-St-Zip: PALM COAST, FL 32137

Title: VSD (X) Change () Addition
Name: CONSER, ROBERT W
Address: 17 OLD KINGS ROAD, NORTH, SUITE J
City-St-Zip: PALM COAST, FL 32137

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: ANNA CONSER

PTD

04/22/2009

Electronic Signature of Signing Officer or Director

Date