

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080736

FILED  
Aug 26, 2008  
Secretary of State

Entity Name: BILL DALY INSURANCE AGENCY, INC.

## Current Principal Place of Business:

10235 W. SAMPLE RD  
203  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

## Current Mailing Address:

10235 W. SAMPLE RD  
203  
CORAL SPRINGS, FL 33065

## New Mailing Address:

FEI Number: 91-2198283

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, JOSE C.P.A.  
12839 NW 18 COURT  
PEMBROKE PINES, FL 33028 US

## Name and Address of New Registered Agent:

THOMAS, C.P.A., JOSE  
12839 NW 18 COURT  
PEMBROKE PINES, FL 33028 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: JOSE THOMAS, C.P.A.

08/26/2008

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: P ( ) Delete  
Name: DALY, WILLIAM  
Address: 10235 W. SAMPLE RD # 203  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: V.P ( ) Delete  
Name: KURUVILLA, THOMAS  
Address: 10235 W. SAMPLE RD  
City-St-Zip: CORAL SPRINGS, FL 33065 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM DALY

P

08/26/2008

Electronic Signature of Signing Officer or Director

Date