2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# P03000113786

Entity Name: TOMMY SURLES INSURANCE AGENCY, INC.

Current Principal Place of Business:

425 S JEFFERSON STREET
MONTICELLO, FL 32344 US

New Principal Place of Business:

225 N. JEFFERSON STREET
MONTICELLO, FL 32344 US

Current Mailing Address:

425 S JEFFERSON STREET
MONTICELLO, FL 32344 US

New Mailing Address:

225 N. JEFFERSON STREET
MONTICELLO, FL 32344 US

FEI Number: 20-0302257 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SURLES, TOMMY
425 S JEFFERSON STREET
MONTICELLO, FL 32344 US

Name and Address of New Registered Agent:

SURLES, TOMMY
225 N. JEFFERSON STREET
MONTICELLO, FL 32344 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: 04/28/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SURLES, TOMMY
Address: 425 S JEFFERSON STREET
City-St-Zip: MONTICELLO, FL 32344 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SURLES, TOMMY
Address: 225 N. JEFFERSON STREET
City-St-Zip: MONTICELLO, FL 32344 US

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: TOMMY SURLES PRES 04/28/2009
Electronic Signature of Signing Officer or Director — Date