2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147077

FILED Feb 05, 2009 Secretary of State

Entity Name: INSURANCE MANAGEMENT GROUP AND TRUST CORPORATION

Current P	rincipal Place	e of Business:	New Principal Place	of Business:	
	HILLS AVE		201 E. KENNEDY BLV	/D.	
ГАМРА, FL 33606		410 TAMPA, FL 33602	410 TAMPA, FL 33602		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1801 W. F	HILLS AVE		201 E. KENNEDY BLV	/D.	
ΓΑΜΡΑ, F			410 TAMPA, FL 33602		
El Number	: 51-0494690	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:		
SHEA, MIC 1801 W. Η ΓΑΜΡΑ, F	ILLS AVE	3			
I801 Ŵ. Η ΓΑΜΡΑ, F Γhe above	ILLS AVE L 33606 U		ourpose of changing its registered	d office or registered agent, or both,	
I801 Ŵ. Η ΓΑΜΡΑ, F Γhe above	ILLS AVE L 33606 U named entity e of Florida.		ourpose of changing its registered	d office or registered agent, or both,	
I801 W. H FAMPA, F The above n the State	ILLS AVE L 33606 U named entity e of Florida. RE:			d office or registered agent, or both, Date	
I801 Ŵ. H FAMPA, F The above n the State BIGNATUF	ILLS AVE L 33606 U named entity of Florida. RE: Electron	submits this statement for the p			
I 801 W. H FAMPA, F The above In the State SIGNATUR Election Car	ILLS AVE L 33606 U named entity of Florida. RE: Electron	submits this statement for the particles of Registered Age of Trust Fund Contribution ().	ent		
I 801 W. H FAMPA, F The above In the State SIGNATUR Election Car	ILLS AVE L 33606 U named entity e of Florida. RE: Electrol mpaign Financin S AND DIREC	submits this statement for the particles of Registered Age of Trust Fund Contribution (). TORS: Delete VANA S AVE.	ent	Date	

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: MIKE SHEA PRES 02/05/2009