

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053812

FILED
Mar 13, 2008
Secretary of State

Entity Name: VREMAN INSURANCE SERVICES, INC.

Current Principal Place of Business:

1301 10TH ST. E.
SUITE A
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

1301 10TH ST. E.
SUITE A
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 20-0928103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VREMAN, MARTIN
2102 WELLON RANCH RD
PARRISH, FL 34219 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VREMAN, MARTIN
Address: 2102 WELLON RANCH RD
City-St-Zip: PARRISH, FL 34219 US

Title: V () Delete
Name: VREMAN, DENISE
Address: 2102 WELLON RANCH RD
City-St-Zip: PARRISH, FL 34219 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: MARTIN VREMAN

PRES

03/13/2008

Electronic Signature of Signing Officer or Director

_____ Date