

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000086344

FILED
Apr 05, 2011
Secretary of State

Entity Name: FCHCN INSURANCE AGENCY, INC.

Current Principal Place of Business:

2000 W COMMERCIAL BLVD
SUITE 100
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2000 W COMMERCIAL BLVD
SUITE 100
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 20-1195805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: SLAKMAN, JOEL
Address: 2000 W COMMERCIAL BLVD SUITE 100
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: VP
Name: NICHOLSBERG, ERIC
Address: 2000 W COMMERCIAL BLVD SUITE 100
City-St-Zip: FT. LAUDERDALE, FL 33309

I hereby 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 all other like empowered.

SIGNATURE: ERIC NICHOLSBERG

VP

04/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date