

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000130398

Entity Name: JAN SMITH INSURANCE, INC.

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

8553 ARGYLE BUSINESS LOOP
2
JACKSONVILLE, FL 32244 US

New Principal Place of Business:

Current Mailing Address:

8553 ARGYLE BUSINESS LOOP
2
JACKSONVILLE, FL 32244 US

New Mailing Address:

FEI Number: 20-1653918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JAN
2036 WOOD LEIGH DR W
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

SMITH, GARLAND J
2036 WOOD LEIGH DR W
JACKSONVILLE, FL 32211 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: GARLAND JAN SMITH

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, JAN
Address: 2036 WOOD LEIGH DR W
City-St-Zip: JACKSONVILLE, FL 32244 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, GARLAND J
Address: 2036 WOOD LEIGH DR W
City-St-Zip: JACKSONVILLE, FL 32211 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: GARLAND JAN SMITH

P

03/25/2009

Electronic Signature of Signing Officer or Director

Date