2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P04000141889

Entity Name: B & E INSURANCE ASSOCIATES INC.

Current Principal Place of Business:

600 BYPASS DR SUITE 217
CLEARWATER, FL 33764

New Principal Place of Business:

18514 US HWY 19N
SUITE D2
CLEARWATER, FL 33764

Current Mailing Address:

600 BYPASS DR SUITE 217
CLEARWATER, FL 33764

New Mailing Address:

18514 US HWY 19N
SUITE D2
CLEARWATER, FL 33764

FEI Number: 20-1748445 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDWARDS, SUSAN J
2153 WATERSIDE DRIVE
CLEARWATER, FL 33764 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: EDWARDS, SUSAN J
Address: 600 BYPASS DR SUITE 217
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: EDWARDS, SUSAN J
Address: 18514 US HWY 19N SUITE D2
City-St-Zip: CLEARWATER, FL 33764

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: SUSAN J EDWARDS PRES 04/15/2009
Electronic Signature of Signing Officer or Director Date