2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# P05000011368

Entity Name: JW RICHARDS INSURANCE SERVICES, INC.

Current Principal Place of Business:

1385 WEST ROAD 434
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1385 WEST ROAD 434
LONGWOOD, FL 32750

New Mailing Address:

PO BOX 52-1722
LONGWOOD, FL 32752

FEI Number: 20-2209043 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOBLE, RICHARD L
1385 WEST STATE ROAD 434
LONGWOOD, FL 32750 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: D ( ) Delete
Name: BLATMAN, BRUCE B
Address: 1385 WEST STATE ROAD 434
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Delete
Name: EPPS, WENDY L
Address: 1385 WEST STATE 434
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Delete
Name: GOBLE, RICHARD L
Address: 1385 WEST STATE ROAD 434
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: GOBLE, RICHARD
Address: PO BOX 52-1722
City-St-Zip: LONGWOOD, FL 32752

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: RICHARD GOBLE DIR 04/20/2009

Electronic Signature of Signing Officer or Director — Date