

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000080164

FILED
May 05, 2011
Secretary of State

Entity Name: PALM BEACH INSURANCE ADVISORY GROUP, INC.

Current Principal Place of Business:

215 SOUTH OLIVE AVE
SUITE 400
WEST PALM BEACH, FL 33401

New Principal Place of Business:

214 EAST LAKEWOOD RD
WEST PALM BEACH, FL 33405

Current Mailing Address:

215 SOUTH OLIVE AVE
SUITE 400
WEST PALM BEACH, FL 33401

New Mailing Address:

214 EAST LAKEWOOD ROAD
WEST PALM BEACH, FL 33405

FEI Number: 65-0958814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUZA, RAYMOND F
214 EAST LAKEWOOD RD
WEST PALM BEACH, FL 33405 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: P
Name: BUZA, RAYMOND F
Address: 214 EAST LAKEWOOD ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: VP
Name: BUZA, MICHAEL R
Address: 214 EAST LAKEWOOD ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

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: RAYMOND F BUZA

PRES

05/05/2011

Electronic Signature of Signing Officer or Director

Date