

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083784

FILED
Mar 09, 2010
Secretary of State

Entity Name: EXPLORER INSURANCE INVESTMENTS, INC.

Current Principal Place of Business:

1514 E. LIVINGSTON ST
ORLANDO, FL 32803 US

New Principal Place of Business:

185 S. WESTMONTE DR.
SUITE 1218
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

P.O. BOX 162909
ALTAMONTE SPRINGS, FL 32716

New Mailing Address:

P.O. BOX 162909
ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 20-3054568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOFFOLI, MICHAEL L
1514 E. LIVINGSTON ST
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

TOFFOLI, MICHAEL L
185 S. WESTMONTE DR.
SUITE 1218
ALTAMONTE SPRINGS, FL 32714 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:

03/09/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: TOFFOLI, MICHAEL L
Address: 185 S. WESTMONTE DR., SUITE 1218
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

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: MICHAEL L. TOFFOLI

P

03/09/2010

Electronic Signature of Signing Officer or Director

Date