2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000089968 1. Entity Name ED JAEGER'S INSURANCE AGENCY, INC.

Principal Place of Business

P.O. BOX 550 AVON PARK, FL 33825 Mailing Address P.O. BOX 550 AVON PARK, FL 33825

FILED Jan 29, 2007 08:00 AM Secretary of State



01152007

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

4. FEI Number Applied For 20-3071360 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

JAEGER, EDWARD J. 3802 SUNRISE DR. SEBRING, FL 33872

DO NOT WRITE IN THIS SPACE

No Chg-P

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8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
After May 1, 2007 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	ing 🖂	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			· -
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS JAEGER, EDWARD J. 3802 SUNRISE DR. SEBRING, FL 33872		<u>. U00000605314</u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					0000000605914 01/30/07-80057-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. Literature certify that the information					

indicated on this report or supplied with this ining does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other managed.

SIGNATURE:

EDWARD &