

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113617

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: CAPE CORAL INSURANCE CENTER, INC.

## Current Principal Place of Business:

643 CAPE CORAL PKWY E, SUITE C  
CAPE CORAL, FL 33904

## New Principal Place of Business:

643 CAPE CORAL PKWY E  
SUITE B  
CAPE CORAL, FL 33904

## Current Mailing Address:

643 CAPE CORAL PKWY E, SUITE C  
CAPE CORAL, FL 33904

## New Mailing Address:

643 CAPE CORAL PKWY E  
SUITE B  
CAPE CORAL, FL 33904

FEI Number: 02-0748497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUSH, JONATHAN  
2548 SW 4TH AVE.  
CAPE CORAL, FL 33914 US

## Name and Address of New Registered Agent:

RUSH, JONATHAN  
1319 SW 9TH CT  
CAPE CORAL, FL 33991 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:

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SLEICHER, PATRICIA  
Address: 4822 SW 5TH PLACE  
City-St-Zip: CAPE CORAL, FL 33914

Title: V ( ) Delete  
Name: RUSH, JONATHAN E  
Address: 1319 SW 9 CT  
City-St-Zip: CAPE CORAL, FL 33991

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: RUSH, JONATHAN E  
Address: 1319 SW 9TH CT  
City-St-Zip: CAPE CORAL, FL 33991

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: JONATHAN RUSH

V

04/14/2009

Electronic Signature of Signing Officer or Director

Date