2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130217

Entity Name: THE AVALON AGENCY, INC.

FILED Apr 25, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
| | |

ROCKY POINT CENTER 3030 N. ROCKY POINT DR. W.

3030 N. ROCKY POINT DR. W. SUITE 800 SUITE 800

TAMPA, FL 33607 TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

ROCKY POINT CENTER 3030 N. ROCKY POINT DR. W.

3030 N. ROCKY POINT DR. W. SUITE 800 SUITE 800

TAMPA, FL 33607 TAMPA, FL 33607

FEI Number: 20-3537126 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PROBASCO, JOSEPH A BUSH ROSS REGISTERED AGENT SERVICES, LLC 220 S FRANKLIN ST 1801 N. HIGHLAND AVENUE

TAMPA, FL 33602 TAMPA, FL 33602

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: JOHN GIORDANO 04/25/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: () Change () Addition

KOWALSKI, PAUL Name: Name:

3030 N. ROCKY POINT DR W. SUITE 800 Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip:

Title: Title: () Delete () Change () Addition

Name: NEELY, HENRY Name: 3030 N.ROCKY POINT DR W.SUITE 800 Address: Address: TAMPA, FL 33607 City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

CHRISTIANSEN, MARK Name: Name:

3030 N.ROCKY POINT DR W.SUITE 800 Address: Address: City-St-Zip: TAMPA, FL 33607 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: HENRY H NEELY D 04/25/2008