

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000007489

Entity Name: JDC INSURANCE AGENCY, INC.

FILED
Nov 13, 2009
Secretary of State

Current Principal Place of Business:

7150 N UNIVERSITY DR.
TAMARAC, FL 333212916

New Principal Place of Business:

Current Mailing Address:

7150 N UNIVERSITY DR.
TAMARAC, FL 333212916

New Mailing Address:

FEI Number: 20-3793877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERBERG & WEISS, P.A.
2665 EXECUTIVE PARK DRIVE
SUITE 2
WESTON, FL 33331 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: PAUL SILVERBERG

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TRAFALGAR INSURANCE AGENCY
Address: 7150 NORTH UNIVERSITY DRIVE
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: COHEN, JUDITH
Address: 7150 NORTH UNIVERSITY DRIVE
City-St-Zip: TAMARAC, FL 33321

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: JUDITH COHEN

P

11/13/2009

Electronic Signature of Signing Officer or Director

Date