

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000019668

Entity Name: DMR INSURANCE INC.

**FILED**  
**Feb 11, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6400 46TH AVENUE NORTH #305  
KENNETH CITY, FL 33709

**New Principal Place of Business:**

1001 STARKEY ROAD  
LOT #107  
LARGO, FL 33771

**Current Mailing Address:**

6400 46TH AVENUE NORTH #305  
KENNETH CITY, FL 33709

**New Mailing Address:**

1001 STARKEY ROAD  
LOT #107  
LARGO, FL 33771

FEI Number: 22-3921484

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: LEAL, DANICE K  
Address: 1001 STARKEY ROAD, LOT #107  
City-St-Zip: LARGO, FL 33771

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: DANICE K. LEAL

PRES

02/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date