

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000037021

Entity Name: G & P INSURANCE, INC.

**FILED**  
**Apr 19, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

12330 EAST TAMIAMI TRAIL  
SUITE 101  
NAPLES, FL 34113 US

**New Principal Place of Business:**

**Current Mailing Address:**

12330 EAST TAMIAMI TRAIL  
SUITE 101  
NAPLES, FL 34113 US

**New Mailing Address:**

FEI Number: 20-4501869

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MUZZONIGRO, GARY  
12330 EAST TAMIAMI TRAIL  
SUITE 101  
NAPLES, FL 34113 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

**OFFICERS AND DIRECTORS:**

Title: D, P ( ) Delete  
Name: MUZZONIGRO, GARY  
Address: 12330 EAST TAMIAMI TRAIL, SUITE 101  
City-St-Zip: NAPLES, FL 34113 US

Title: D,VP ( ) Delete  
Name: MUZZONAGRO, PATTI  
Address: 12330 EAST TAMIAMI TRAIL, SUITE 101  
City-St-Zip: NAPLES, FL 34113 US

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

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

Title: D,VP (X) Change ( ) Addition  
Name: MUZZONIGRO, PATTI D  
Address: 12330 EAST TAMIAMI TRAIL, SUITE 101  
City-St-Zip: NAPLES, FL 34113 US

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY MUZZONIGRO

PRES

04/19/2007

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

\_\_\_\_\_  
Date