

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000108976

Entity Name: A&C INSURANCE AGENCY INC

FILED
Feb 08, 2012
Secretary of State

Current Principal Place of Business:

4639 SAN JUAN AVE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

4639 SAN JUAN AVE
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 20-5408067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNIE, BLAIR L PRES
4639 SAN JUAN AVE
JACKSONVILLE, FL 32210 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: PRES
Name: BLAIR, CONNIE L
Address: 4639 BALLEJO CT N
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP
Name: REYNOLDS, ALVIN R JR
Address: 4081 SAN JUAN AVE
City-St-Zip: JACKSONVILLE, FL 32210

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: CONNIE L BLAIR

PRES

02/08/2012

Electronic Signature of Signing Officer or Director

Date