

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000151148

FILED
Apr 18, 2008
Secretary of State

Entity Name: COLEMAN INSURANCE SOLUTIONS, INC.

Current Principal Place of Business:

29190 US HWY 19 N
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

29190 US HWY 19 NORTH
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 20-8028769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, WILLIAM J
538B WILKIE ST.
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

COLEMAN, CHRISTOPHER
1523 PUTNAM CT
DUNEDIN, FL 34698 US

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: CHRISTOPHER COLEMAN

04/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLEMAN, RACHEL A
Address: 1523 PUTNAM CT.
City-St-Zip: DUNEDIN, FL 34698

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: COLEMAN, CHRISTOPHER PRES
Address: 1523 PUTNAM CT
City-St-Zip: DUNEDIN, FL 34698

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: CHRISTOPHER COLEMAN

PRES

04/18/2008

Electronic Signature of Signing Officer or Director

Date