2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000002581

Entity Name: INSURANCE QUOTE ZONE. INC.

FILED Jan 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

27503 CEDAR PARK CT 5327 PRIMROSE LAKE CIR

WESLEY CHAPEL, FL 33543 TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

27503 CEDAR PARK CT 5327 PRIMROSE LAKE CIR WESLEY CHAPEL, FL 33543 TAMPA, FL 33647

FEI Number: 04-3787804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LEFEBVRE, KATHARINE N
27503 CEDAR PARK CT
WESLEY CHAPEL, FL 33543 US
LEFEBVRE, PAUL J
17524 SANDGATE CT
LAND O LAKES, FL 34638 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: PAUL LEFEBVRE 01/09/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 LEFEBVRE, KATHARINE N
 Name:
 LEFEBVRE, PAUL J

 Address:
 27503 CEDAR PARK CT
 Address:
 17524 SANDGATE CT

 City-St-Zip:
 WESLEY CHAPEL, FL 33543
 City-St-Zip:
 LAND O LAKES, FL 34638

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: PAUL LEFEBVRE P 01/09/2008