## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000007819

FILED Apr 07, 2008 Secretary of State

Entity Name: GITHENS INSURANCE & FINANCIAL SERVICES, INC.

**New Principal Place of Business: Current Principal Place of Business:** 595 WEST MAIN ST. BARTOW, FL 33830 **Current Mailing Address: New Mailing Address:** 4320 BRAEMAR AVENUE LAKELAND, FL 33813 US FEI Number: 26-0423054 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: VINING, C GEOFFREY VINING, C GEOFFREY 129 SOUTH KENTUCKY AVENUE 1611 HÁRDEN BOULEVARD LAKELAND, FL 33803 SUITE 702 LAKELAND, FL 33801 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: 04/07/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition GITHENS, MICHELL Name: Name: 4320 BRAEMAR AVENUE Address: Address: City-St-Zip: LAKELAND, FL 33813 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: GITHENS, STEVEN W Name: 4320 BRAEMAR AVENUE Address: Address: LAKELAND, FL 33813 US City-St-Zip: City-St-Zip:

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: STEVEN W. GITHENS 04/07/2008 S,T