

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000021432

FILED
Mar 30, 2011
Secretary of State

Entity Name: DR INSURANCE OF FLORIDA, INC.

Current Principal Place of Business:

4372 SOUTHSIDE BLVD
205
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4372 SOUTHSIDE BLVD
205
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 20-8476673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONEY, DANIEL R
4372 SOUTHSIDE BLVD
205
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

LORE, DEADRA
4372 SOUTHSIDE BLVD
205
JACKSONVILLE, FL 32216 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: DEADRA LORE

03/30/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: RONEY, DANIEL R
Address: 4372-205 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

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: DANIEL R. RONEY

D

03/30/2011

Electronic Signature of Signing Officer or Director

Date