

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000036984

FILED
Mar 17, 2009
Secretary of State

Entity Name: SPARKS GIEBEIG INSURANCE & INVESTMENTS, INC.

Current Principal Place of Business:

21125 OLD BELLAMY ROAD
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1978
ALACHUA, FL 32616

New Mailing Address:

FEI Number: 20-8725098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, JOHN P CPA
8382 BAYMEADOWS ROAD, SUITE 2
JACKSONVILLE, FL 32256 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GIEBEIG, P. SPARKS
Address: 21125 OLD BELLAMY ROAD
City-St-Zip: ALACHUA, FL 32615

Title: ST () Delete
Name: DIETRICH, LARETT G
Address: 6146 NW 38TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GIEBEIG, P. SPARKS III
Address: 21125 OLD BELLAMY ROAD
City-St-Zip: ALACHUA, FL 32615

Title: () Change () Addition
Name:
Address:
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: P. SPARKS GIEBEIG III

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date