

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000046154

FILED
Apr 11, 2012
Secretary of State

Entity Name: FOUR CORNERS INSURANCE AGENCY, INC.

Current Principal Place of Business:

45713 US HWY 27
DAVENPORT, FL 33897

New Principal Place of Business:

Current Mailing Address:

45713 US HWY 27
DAVENPORT, FL 33897

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAP HOLDINGS, INC
45713 US HWY 27
DAVENPORT, FL 33897 US

Name and Address of New Registered Agent:

4 CORNERS INSURANCE, INC
45713 US HWY 27
DAVENPORT, FL 33897 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: FOUR CORNERS

Electronic Signature of Registered Agent

04/11/2012

Date

OFFICERS AND DIRECTORS:

Title: DPST
Name: 4 CORNERS INSURANCE, INC
Address: 45713 US HWY 27
City-St-Zip: DAVENPORT, FL 33897

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: FOUR CORNERS

Electronic Signature of Signing Officer or Director

DPST

04/11/2012

Date