

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000065797

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: J.B.D. INSURANCE AGENCY, INC.

## Current Principal Place of Business:

726 BAY TREE COURT  
NAPLES, FL 34108

## New Principal Place of Business:

## Current Mailing Address:

726 BAY TREE COURT  
NAPLES, FL 34108

## New Mailing Address:

FEI Number: 34-1042985

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AUSTIN, ARLENE F ESQ.  
700 11TH STREET SOUTH, SUITE 102  
NAPLES, FL 341026777 US

## Name and Address of New Registered Agent:

AUSTIN, ARLENE F ESQ.  
700 11TH ST SOUTH, SUITE 102  
NAPLES, FL 341026777 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: ARLENE F AUSTIN

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition  
Name: BOWERS, JOHN H  
Address: 726 BAY TREE CT  
City-St-Zip: NAPLES, FL 34108

Title: S ( ) Change (X) Addition  
Name: BOWERS, JOHN J  
Address: 9155 BRENDAN PRESERVE CT  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP ( ) Change (X) Addition  
Name: BOWER, BARBARA A  
Address: 726 BAY TREE CT  
City-St-Zip: NAPLES, FL 34108

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: JOHN J BOWERS

T

04/30/2008

Electronic Signature of Signing Officer or Director

Date