

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000069101

FILED  
Aug 21, 2008  
Secretary of State

Entity Name: AJON INSURANCE SERVICES, INC.

## Current Principal Place of Business:

9381 W. SAMPLE RD.  
SUITE 201  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

## Current Mailing Address:

9381 W. SAMPLE RD.  
SUITE 201  
CORAL SPRINGS, FL 33065

## New Mailing Address:

FEI Number: 68-0651763

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AJON, WENDY M  
5706 WHITE HICKORY CIRCLE  
TAMARAC, FL 33319 US

## Name and Address of New Registered Agent:

AJON, WENDY M  
9381 W. SAMPLE RD.  
SUITE 201  
CORAL SPRINGS, FL 33065 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: WENDY AJON

08/21/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: AJON, WENDY  
Address: 5706 WHITE HICKORY CIRCLE  
City-St-Zip: TAMARAC, FL 33319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WENDY AJON

PRES

08/21/2008

Electronic Signature of Signing Officer or Director

Date