## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000088999

Entity Name: ELC INSURANCE AGENCY, INC.

FILED Apr 18, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2860 56TH AVENUE N.E. 11921 SARA DRIENNE LANE UNIT 1 NAPLES, FL 341207483 US BONITA SPRINGS, FL 34135

**Current Mailing Address: New Mailing Address:** 

15275 COLLIER BLVD 2860 56TH AVENUE N.E. NAPLES, FL 341207483 US 201 PMB 219 NAPLES, FL 34119 US

FEI Number: 42-1736553 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RODRIGUEZ, NORA A RODRIGUEZ, NORA A 2860 56TH AVENUE N.E. 5830 OIL WELL RD US NAPLES, FL 341207483 US NAPLES, FL 34120

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: NORA RODRIGUEZ 04/18/2008

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

NAPLES, FL 341207483 US

NAPLES, FL 341207483 US

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PRFS** ( ) Delete Title: **PRFS** (X) Change ( ) Addition

RODRIGUEZ, NORA A Name: Name: RODRIGUEZ, NORA A 2860 56TH AVENUE N.E. 15275 COLLIER BLVD #201 PMB 219 Address: Address:

City-St-Zip: NAPLES, FL 341207483 US City-St-Zip: NAPLES, FL 34119 US

VΡ (X) Delete Title: () Change () Addition

Title: RODRIGUEZ, NORA A Name: Name: 2860 56TH AVENUE N.E. Address: Address:

(X) Delete Title: Title: SEC () Change () Addition

RODRIGUEZ, NORA A Name: Name: 2860 56TH AVENUE N.E. Address: Address: City-St-Zip:

Title: TRES Title: () Change () Addition

(X) Delete RODRIGUEZ, NORA A Name: Name: Address: 2860 56TH AVENUE N.E. Address: City-St-Zip: NAPLES, FL 341207483 US 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: NORA RODRIGUEZ **PRES** 04/18/2008