## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000099998

Entity Name: BAY CITIES INSURANCE AGENCY, INC.

FILED Feb 03, 2012 Secretary of State

of Business:	New Principal Place o	of Business:	
IS			
Current Mailing Address: New Mailing Address:		:	
IS			
FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Nam		ame and Address of New Registered Agent:	
submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
ic Signature of Registered Age	ent	Date	
	FEI Number Applied For ( ) Surrent Registered Agent:  AVE JS Submits this statement for the p	New Mailing Address  SE New Mailing Address  JS  FEI Number Applied For ( )  FUI Number Not Applicable ( )  Surrent Registered Agent:  Name and Address of	

## **OFFICERS AND DIRECTORS:**

Title: MR

Name: CASTLE, TIMOTHY
Address: 13132 ROYAL MENGL AVE.
City-St-Zip: ODESSA, FL 33556 US

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: TIMOTHY CASTLE PRES 02/03/2012