

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102043

FILED
Apr 27, 2011
Secretary of State

Entity Name: FIRST CHOICE INSURANCE OF AMERICA, INC.

Current Principal Place of Business:

2942 UNIVERSITY BLVD W
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

2942 UNIVERSITY BLVD W
JACKSONVILLE, FL 32217 US

New Mailing Address:

FEI Number: 26-0899394 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
12000 N. DALE MABRY HIGHWAY
SUITE 110
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DIR.
Name: OCCY, ALGO
Address: 10857 COLORADO SPRINGS AVE
City-St-Zip: JACKSONVILLE, FL 32219 US

Title: PRES
Name: OCCY, ALGO
Address: 10857 COLORADO SPRINGS AVE.
City-St-Zip: JACKSONVILLE, FL 32219 US

Title: SEC.
Name: OCCY, RAYMONDE
Address: 10857 COLORADO SPRINGS AVE.
City-St-Zip: JACKSONVILLE, FL 32219 US

Title: TREA
Name: OCCY, ALGO
Address: 10857 COLORADO SPRINGS AVE.
City-St-Zip: JACKSONVILLE, FL 32219 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: ALGO OCCY

_____ Electronic Signature of Signing Officer or Director

PRES

04/27/2011

_____ Date