

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000114172

Entity Name: SEIBERT INSURANCE AGENCY, INC.

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

SUITE 111 5121 EHRlich ROAD
TAMPA, FL 33624

New Principal Place of Business:

5121 EHRlich ROAD
SUITE 111
TAMPA, FL 33624

Current Mailing Address:

SUITE 111 5121 EHRlich ROAD
TAMPA, FL 33624

New Mailing Address:

P. O. BOX 270729
TAMPA, FL 33688

FEI Number: 26-1265841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEIBERT, V. KEITH
13350 GOLF CREST CIRCLE
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEIBERT, V.KEITH
Address: 13350 GOLF CREST CIRCLE
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: ROELING, KAREN
Address: SUITE 111 5121 EHRlich ROAD
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: V. KEITH SEIBERT

DIR

01/07/2008

Electronic Signature of Signing Officer or Director

Date