## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000114172

Entity Name: SEIBERT INSURANCE AGENCY, INC.

FILED Mar 08, 2011 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 5121 EHRLICH ROAD SUITE 111 TAMPA, FL 33624 **Current Mailing Address: 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: Name and Address of New Registered Agent: SEIBERT, V. KEITH 13350 GOLF CREST CIRCLE TAMPA, FL 33618 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: PD

Name: SEIBERT, V.KEITH

Address: 13350 GOLF CREST CIRCLE

City-St-Zip: TAMPA, FL 33618

Title: VSTD

Name: ROELING, KARYN

Address: SUITE 111 5121 EHRLICH ROAD

City-St-Zip: TAMPA, FL 33624

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: V. KEITH SEIBERT D 03/08/2011