## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000119913

SNOW, BRENDA A

608 DUNDEE CIRCLE

WEST MELBOURNE, FL 32904 US

Name:

Address:

City-St-Zip:

Entity Name: SNOW INSURANCE SERVICES, INC.

FILED Mar 26, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
608 DUNDEE CIRCLE WEST MELBOURNE, FL 32904 US		2084 MEADOWLAND AVENUE MELBOURNE, FL 32904 US			
Current M	lailing Address:		New Mailing Addres	s:	
	DEE CIRCLE ELBOURNE, FL 32	904 US			
FEI Number	: 35-2314929 F	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
WEST ME	DEE CIRCLE ELBOURNE, FL 32		purpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
01011/110		ignature of Registered Ag	gent	Date	
Election Ca	mpaign Financing Tru	st Fund Contribution ( ).			
OFFICER	S AND DIRECTOR	≀s:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PRES ( ) Dele SNOW, BRENDA A 608 DUNDEE CIRCI WEST MELBOURNE	_E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TRES () Dele SNOW, BRENDA A 608 DUNDEE CIRCI WEST MELBOURNE	_E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SECT () Dele SNOW, BRENDA A 608 DUNDEE CIRC WEST MELBOURNE	_E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DIR () Dele	ate.	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BRENDA SNOW PRES 03/26/2008