2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# P07000129322

Entity Name: BAKER INSURANCE AGENCY, INC.

Current Principal Place of Business:

267 N. COLLIER BLVD., STE. G
MARCO ISLAND, FL 34145

New Principal Place of Business:

Current Mailing Address:

267 N. COLLIER BLVD., STE. G
MARCO ISLAND, FL 34145

New Mailing Address:

FEI Number: 61-1547620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WANDERON, THOMAS
809 WALKERBILT RD., STE. 5
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

TAX & FINANCIAL STRATEGIST LLC
3365 WOODS EDGE CIR
104
BONITA SPRINGS, FL 34134 US

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: THOMAS WANDERON 01/06/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BAKER, W. TROY
Address: 267 N. COLLIER BLVD., STE. G
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: W TROY BAKER PD 01/06/2009
Electronic Signature of Signing Officer or Director Date